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Cover Picture: Miss Prancee crosses the bridge at the abattoir to visit a new baby.
Story on page 23.

NFB AND CBC

Our public film and radio services, the National Film Board and the Canadian Broadcasting Corporation, are serving the cause of social welfare exceedingly well, and would serve us better if we made full use of what they offer.

The Department of National Health and Welfare has recently issued a booklet called *Mental Health Films and Filmstrips* (all produced by or for the NFB), with instructions about how to order, how to borrow, and how to use. The films and filmstrips listed would do credit to any government film-producer anywhere in the world, and indeed many of them have won important prizes for excellence.

In addition to the mental health films, the Film Board has produced other films that ought to be widely used to acquaint the public with social welfare needs and activities. "Farewell Oak Street", on slum clearance; "The War on Want", on Colombo Plan work in Ceylon; "Dutch Family Makes a New Start", on immigration; "In Search of Home", on child adoption; "Problem Clinic", on legal aid; "Everybody's Handicapped", on employment for the disabled—these are just some of the more recent.

The CBC Citizens' Forum has already given programs this season on Charity Appeals and Divorce. On November 18 it will give a program entitled "Is Civil Defence Obsolete?" and on January 20 one called "Do We Need a Bolder Immigration Policy?"

The mental health broadcasts scheduled for the next few months (weekly on Monday evenings) will touch on many more matters than those commonly associated with mental health. "In Search of Ourselves", a series now running, is on specific emotional problems as they manifest themselves in everyday situations. "Return Journey", six broadcasts, will deal with adjustment to physical handicap. "As Children See Us", six more broadcasts, will depict family life and adults in authority as they appear to children. The final series of six broadcasts is called "Judge for Yourself" and will show a family court judge and his staff "in action for remedial justice".

In the folder announcing these programs, and their times and dates, there is a list of people in provincial departments of health or welfare from whom additional copies may be obtained for wide distribution: an

interesting example of cooperation among government departments towards public education. (Single copies of the folder may be obtained from the CBC, or the Canadian Mental Health Association, 111 St. George Street, Toronto.)

Both the CBC and the NFB put first-rate producers, directors, writers and actors to work on these productions, and they ensure authenticity in the content by working in close consultation with experts in the subjects of the films and broadcasts. The result is that important ideas are conveyed to listeners and watchers with a beautiful directness and simplicity that tells the story far better than pages and pages of exposition.

AFTER THE PRISON RIOT

The report of the Commissioner of Penitentiaries on the September riot at Kingston Penitentiary has now been released. No definite cause for the disturbance was uncovered except the influence of a small handful of difficult prisoners.

However, the fundamental cause for such outbreaks is always the same: you cannot imprison human beings without building up pressures that inevitably lead to explosions. The press reports spoke of the inmates howling and screaming as they went about their work of destruction. These men were on an emotional binge and what they did can only be explained by that fact.

This in no way implies criticism of the administration of the federal penitentiaries. On the contrary the Commissioner of Penitentiaries is doing an excellent job in spite of serious handicaps of old buildings and salaries that lead to heavy staff turnover.

The hard fact is that treatment and imprisonment are uneasy bed-fellows. Treatment is difficult if not impossible in the traditional prison. This does not mean that the programs of recreation, hobbies and education offered in the penitentiaries are not desirable. They help keep down the pressures that lead to disturbances, and help reduce the psychological damage that imprisonment inflicts on the inmates. However they are basically safety valves, and any treatment value they have is incidental. They have very little to do with correcting the state of mind that led to criminal behaviour in the first place.

What should be done? Everyone seems agreed that the more dangerous offenders should be kept where they can do no harm, but that does not mean we should build more and stronger-walled institutions for the incorrigibles. That approach is upside down. Instead of putting the dangerous criminals in still closer confinement, we should leave

them where they are and take the reformable men out. This can be done by expanding our probation and parole services to permit treatment in the community. And of those who cannot safely be left at large, many can be treated in "open institutions" where the ill effects of imprisonment can be kept to a minimum.

Along with probation, parole and open institutions must go highly qualified staff and good clinical facilities. It is essential that we come to recognize crime as a mental health problem, and abandon the last vestiges of our belief that society must revenge itself on the offender. Revenge is an emotional outburst on our part that we cannot afford.

FROM THE EDITORIAL DESK

What *is* social work? A lot of people are puzzled by this question. Three articles in this issue go a long way towards answering it: Margaret Cork's piece on the problem drinker, Father Bowers' on child welfare in 1954, and Dr. Davies' on the churches and the non-sectarian agencies. •••

We had so much material for the International Social Welfare issue (June 1954) that we had to omit the book reviews and a few other items. We particularly regretted the book reviews because they were full of information. Several of them appear in this issue and the rest will be forthcoming soon. Perhaps it's as well we couldn't put all the international material into one number in June. Readers of the magazine are more alert now than they were then to the interest and importance of work in distant parts, because of the International Conference of Social Work and more recently the Colombo Plan Conference in Ottawa in October. Incidentally, we haven't forgotten the World Congress of Mental Health. We hope to publish some articles about it, or papers from it, very soon. •••

November 1, 1954

Once again we have been brought up short by the shocking riots that have taken place in prisons in both Canada and the United States in the past few months. Do prisons accomplish what they set out to do? Is close confinement the way to prepare men for life outside the walls? One of the editorials above discusses the point, and Alex Edmison's article on a prison camp in Newfoundland (page 28) tells about a prison without walls that seems to be doing a good restorative job. •••

Are we all so lacking in family and friends' affection that we have to pretend the world is one big happy family by calling one another by first names at first meeting? It's nice to be called by one's first name when it means something, but we're blessed if it means anything when the new dentist does it—and the other day we heard about a clerk in a clothing store who asked a customer what his first name was, and then used it in every other sentence. There's a lot to be said for the wee bit of formality that sets the tone for truly businesslike relations.

M. M. K.

THREE ADDITIONS TO COUNCIL STAFF

Peter Stanne became secretary to the Canadian Welfare Council's Family and Child Welfare Division at the beginning of September, replacing Phyllis Burns who is now Director of Welfare Services. Mr. Stanne brings a wide variety of experience to his new job. His most recent position was as social service adviser and consultant on refugees to the U.S. High Commission in Germany. He worked with displaced persons under the United Nations Relief and Rehabilitation Administration and the Inter-Governmental Committee for the Care of Refugees. Before going abroad Mr. Stanne had casework experience in public welfare, and held positions as probation and rehabilitation officer. While in the U.S. Army he was a counsellor at a military hospital.



Peter Stanne

Mr. Stanne graduated from Syracuse University and received the Master of Science degree in sociology and psychology from the University of Massachusetts. Later he took social work training at the Chicago School of Social Service Administration, specializing in child welfare.



Ghislaine Guindon

The appointment of Miss Ghislaine Guindon as assistant secretary of the Family and Child Welfare Division is an important step towards

meeting two long-felt wants in the Council. With the associate secretary, Miss Marion Murphy, the Division now has a strong team of three staff members. In addition, Miss Guindon, who is bilingual, will strengthen the Council by freeing our central French services and their capable secretary, Miss Marie Hamel, from much of the work they have been carrying out for the Division.

Miss Guindon joined the Council staff on September 13. She is a graduate of the School of Social Work, University of Montreal, and has worked for five years in the Children's Aid Societies of Ottawa and Cornwall and for one year as unit supervisor with the School of Social Work, University of Toronto. She has recently been employed as a caseworker in the psychiatric clinic of the Children's Memorial Hospital in Montreal.

The French-Speaking Services will also be much improved by the ap-



Marthe Leduc

pointment of Miss Marthe Leduc (who came at the end of August) as full time translator to aid in the bilingual work of all sections of the Council. Miss Leduc has served as a translator in the Public Relations Branch of the Canadian Army, and following this she was executive secretary for correspondence courses at the University of Ottawa. She has a master's degree in French literature from the University of Ottawa.

CHILD WELFARE—1954

By SWITHUN BOWERS, O.M.I.

Child welfare means something different in 1954 from what it meant in 1854, and the 'something different' entails different ways of working with children and their families. Father Bowers, who is Director of St. Patrick's School of Social Welfare, Ottawa, here explains what this means for modern child welfare services.

The article is based on lectures given within the past few months before the Hamilton Children's Aid Society and the Association of Children's Aid Societies of Ontario.

EACH and every child has inherent rights as a human person and particular prerogatives as a child, as a minor. Each and every child has the right to the essentials of life and well-being, which includes those things, tangible or intangible, necessary for growing up to mature and healthy adulthood.

It is the family that holds primary responsibility for its child and for the meeting of that child's needs. Secondary to this primary responsibility is the obligation of society to guarantee, safeguard, and protect those rights and prerogatives. These are the fundamental principles upon which all child welfare rests.

The One Purpose

A child welfare agency exists for one purpose, and for one purpose alone. It exists to maintain the rights of children and to meet their needs, either through assistance to the family in the discharge of its responsibilities, or through temporary or permanent assumption of the family's role. A child welfare agency exists to serve

children who need its ministrant function, and the adequacy of this service is the measure by which it shall be judged.

Truistic as this may seem, it can be, and sometimes is, lost sight of. Occasionally one meets social workers who convey the unfortunate impression that the children's agency exists to provide them with a laboratory for the exercise of their technical skills.

Sometimes one comes across administrators whose attitudes suggest that they look upon the agency as a mere appendage to a financial budget in which they can demonstrate their wizardry by turning red into black.

Not unknown is the respected member of the community, who may even sit on the Board, who seems to consider the agency as a necessary evil for removing from public gaze the ugly and sordid scenes of child abuse which might otherwise disturb his and the community's conscience.

The children's agency exists because children exist; because children have needs which must be met; because when those needs are not being met, or cannot be met by those primarily responsible, then society itself has the obligation to meet them, and thus preserve the vigour and stability of its own life. It was through this sense of communal responsibility that the first children's agencies and institutions came into being.

In Days Gone By

Today it is fashionable to mock and decry the rigid conventions and censorious attitudes which so often circumscribed the purpose of children's agencies, and to disregard the profound spiritual convictions as to the brotherhood of man which gave them



birth and fostered that spirit of community which seems so sadly lacking among us.

It is true that patterns of living have changed, but not every aspect of change can be equated with progress. Sixty years ago, communities were smaller, more closely knit, less vagrant in composition, not so readily swayed by outside influences and loyalties.

Much of life revolved around local institutions, particularly around the church, the persistent reminder that man is his brother's keeper. The less fortunate were looked upon as part of "our town," sometimes to its embarrassment but at least to its concern. "Passing the buck" had not reached the proportions it has now attained.

This spirit of community did evoke real response to children in need. The old-type kinship family still flourished, and this broad family grouping did try to fulfil its responsibility toward those who were often dubbed "the poor relations." In the relatively stable society that obtained, community sanctions—approval, disapproval, condemnation, ostracism—unbending though they often were, did act as a rather powerful deterrent to conduct which could be construed as child neglect. Religious and spiritual sanctions likewise had far more influence on general conduct.

There was child neglect, of course. There were foundlings; there were children deserted by parents; there were orphans who had no claim on a kinship family. Such children, children who faced deprivation of the physical necessities of life, became the particular charge of the first children's agencies and institutions.

There were limitations and lacks in the care provided them. There was the thwarting of individual capacities and talents which regimentation induces. There was a lack of awareness of those emotional needs of the child which, when unmet, give rise to personality distortion so that "the institution child" became something of a clinical category. There was the economic exploitation that was too frequently an outcome of the "farming out" of children.

However, these agencies were able, on the whole, to meet the major apparent needs of the neglected and dependent child. And it should be remembered that cultural influences, particularly the strong sense of "belonging" which permeated the old-time community, lessened to some extent the number of children suffering from those subtler and more insidious forms of neglect which bedevil society today. To these early child welfare agencies came children who needed food, clothing, and shelter; they were fed, they were clothed, they were sheltered.

Neglect Today

Over the years life has changed. The old standards and the old values have been weakened; in some instances, have been eclipsed. Sanctions, other than those maintained through the rigour of the law, are often openly scoffed at.

Drawings by Doug. Wright. Reproduced by kind permission from *Mental Health* (June 1954), the bulletin of the Mental Hygiene Institute, Montreal.

The stable population of the past has been, in large measure, supplanted by one of marked mobility. The complex pattern of modern life has brought about ever increasing pressures upon the family. The kinship family has been replaced, beyond a few cultural islands, by the conjugal family of husband and wife.

Higher standards of living, the relative increase in earning power, social security measures, have meant that the unmet needs of children are far less likely to be in the sphere of physical essentials. It is not surprising, therefore, to find a notable difference in the kind of children coming to the attention of our child welfare organizations.

There are still instances of serious physical deprivation—the cases that make the headlines—but the majority of today's neglected children are ones who have been psychologically and emotionally deprived. Children who have lacked the elemental atmosphere of security through which and in which they acquire that sense of personal worth which is fundamental to normal development; children who have been held hostage to the adult world and used as pawns in parental conflicts; children who have been psychologically exploited to satisfy the unmet needs of a parent, needs which should legitimately be met through mature adult relationships; children who have been denied their basic heritage—the right to be children.

We have learned that the repercussions of these types of neglect are every whit as serious as physical deprivation, and the consequences to society of far graver import since they strike at its very fabric. In general, physical deprivation affects only the one member of society involved; psychological deprivation stretches

out tentacles that involve an ever multiplying number of people. Disturbed children grow up to become neurotic, distorted adults; they marry, carrying their disturbed personality into the marital relationships; they beget children, children exposed from birth to a misshapen family situation, disturbed children who grow up and found families, with the vicious circle repeating itself in ever widening spirals.

We have learned that life experience is the great moulder of men, not merely the specific things that happen to the individual, but, primarily, how he responds and reacts to them. This in turn is shaped by the particular emotional connotation and affect that these experiences carry for him.

We have learned that although all of life experience carries this significance, the experiences of childhood and the psychic meaning they hold, have far deeper and more enduring import, since they impinge upon the human being in his most plastic and receptive years.

We have learned that all behaviour, no matter how senseless it may seem, serves some purpose for the individual. We have learned that everyone has the need to defend himself against the repetition of emotional hurt, and that the adjustive patterns of behaviour adopted in the face of severe emotional deprivation can, and often



do, lead the individual into conflict with his fellows and with society itself.

We know that values, standards, habits of control, are inculcated through childhood relationships with parents and parental figures whose love and acceptance the child cherishes and wishes to retain. We know that when such relationships are lacking, resolution of the universal conflict between individual freedom and rightful restrictions becomes a hundredfold more difficult.

These are some of the factors entering into the situations that challenge our child welfare agencies today, situations pregnant with portent for us, for our children, for our society. This is the pattern of child neglect in 1954.

Child Protection, New Style

Such situations cannot be met with the old tools, the old methods, the old type of competence deemed suitable for child welfare work. Material provision for the child has little bearing on the core of such problems.

Capacities in child welfare workers that were adequate and satisfactory for meeting conditions arising out of physical deprivation are not only inadequate for meeting these new situations, but frequently can be harmful and hasten the destructive process. These situations require a very broad understanding of the multiplicity of factors influencing behaviour and attitudes. It takes real skill in establishing a re-educative relationship with both child and parents to halt and heal the rot that has set in.

Previously, most of the types of neglect encountered required that the child be taken into care so that elemental needs might be met. Today, the neglect most frequently encountered is such that substitute care can never adequately supply the natural

healing values that exist within the child's own family, if only that family can be re-oriented and re-mobilized so as to meet the child's needs.

The master-key to effective child welfare lies in protective work, often misnamed preventive work. Few cases come to the children's agency which, in the wildest flight of fancy, could be said to be at the prevention stage. Child protection today is rehabilitative work carried on within the milieu, the family, that alone provides natural restorative remedies. Too often has the tendency been to consider only the child, and not to recognize that in few cases can problems be solved for the child apart from the parents.

The Power of Families

The parent who is unprotective of his child, apparently indifferent, irresponsible, and inadequate, represents one of the greatest challenges to social work skill that it is possible to find. Yet that parent has something to give the child, which, in most instances, no other person or agent can give, that fundamental sense of belonging to "my family" which is crucial in normal development.

It is so easy to point out all the weaknesses and limitations in parents and family situations as reasons why a child should be brought into substitute care. It is far more difficult and time-consuming to uncover the long hidden and dormant strengths which lie far beneath the surface, and then to fan them into flame, a flame which, even then, sheds but an uncertain and a wavering light. We cannot expect that the inadequate and irresponsible parent can be changed, by the waving of the social work wand, into a perfectly polished pillar of society. The goal must rather be a sufficient measure of adjustment to meet the elementary emotional needs of the child.

Always there will be the child who has to find some solution to his difficulty apart from the parent, for not all parents, neglectful or otherwise, are able to use help. But, many parents *can* and *will*, if the kind of help they need and the skill which enables them both to want and to use it, is at their service. Their numbers will increase in direct proportion to the amount of skill and time (and the funds to provide that skill and time) engaged in intensive protective services.

False would we be to our very selves, if we abrogated our belief in people, and our basic belief in their capacity to change. Production of the requisite change is not beyond the present-day skills of social work. That has been demonstrated. But far too often that skill has not been utilized, or has been nullified by un-

realistic and quantitative demands. It costs money, but every dollar spent for adequate skilled service is worth its value tenfold when related to the enormous costs of child care programs.

The Long View

Are we prepared to invest in the future, not our future, but our children's future, and the future of the society in which they will live and have a part? Or are we mainly concerned about this year's budget, and how to keep expenditures at the lowest possible level and still patch up and smooth over the more obvious problems of child neglect that lie on our very doorsteps? Are we going to close the gap in child welfare between our expressed idealism and what we are actually doing for children? Herein lies the acid test of our integrity.

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INTERNATIONAL STANDARDS FOR SOCIAL SECURITY

By JOSEPH W. WILLARD

THE International Convention on Social Security passed by the General Assembly of the International Labour Organization at its 35th session in Geneva in 1952, represents the adoption by that organization of a broader approach to the question of social security.

Throughout the twenties and thirties the International Labour Conference approved a number of Recommendations and Conventions, each one dealing with a particular contingency or a specific area of social security. In contrast, the 1952 instrument denotes an attempt to deal with social security as a whole rather than in parts. A series of contingencies affecting the security of the individual and the family are brought within the scope of this one instrument.

In accepting a comprehensive approach to social security, the ILO is merely reflecting a development that has taken place in its Member States over the past two decades. The introduction of a general social security system in New Zealand commencing in 1938, the publication of a number of special studies such as the Beveridge Report in Great Britain, the Marsh Report in Canada, and the National Resources Planning Board "Report on Security, Work and Relief Policies" in the United States were but a few of the milestones in this shift in emphasis.

This effort to treat the social security system as a whole raises certain fundamental problems when an attempt is made to translate this approach into an international instrument. This is particularly true when

it is recognized that participants under a Convention are usually expected to assume comparable obligations up to the level of the established standard, and that the determination of this standard is related to what might be termed a welfare concept.

This concept raises certain basic difficulties when it is applied to a wide variety of countries at different stages of social and economic development. First of all, it cannot adequately take into account the fact that countries with a high level of national income are in a position to maintain relatively high standards and that the situation is reversed in the case of countries with a comparatively low level of income. The countries that have the greatest need for social security are those which are least able to afford extensive provisions in this field.

Second, in using this concept the Convention permits a choice of three out of nine branches of social security and the relative importance of these branches, whether measured in terms of welfare leverage or financial outlays, varies. The nine branches of social security include: medical benefits; sickness benefits; unemployment benefits; old age benefits; employment injury benefits; family benefits; maternity benefits; invalidity benefits; and survivors' benefits. To qualify under the standard, a Member State must meet the minimum requirements for at least three of these nine contingencies, including one branch relating to unemployment, old age, employment injury or survivors' benefits.

Under the existing Convention a country that distributes a given ex-

penditure on three branches of social security might be in a position to qualify under the minimum standard; but if the same expenditure were allocated to all nine branches or even four or five branches this same country might fall short of the established standard in any three branches.

Thus the instrument cannot ensure any equity in the relative importance of the obligations assumed by different countries qualifying under the convention.

Further, in so far as the minimum standard may be used as a guide for the development of social security programs within any one country, it would tend to encourage the channeling of financial expenditures into the less costly branches of social security for the purpose of meeting the standard.

In many instances this could mean that added increments of expenditure would not be directed towards an orderly development of social security measures based on the particular welfare needs and peculiar economic development of the country concerned.

In addition, the relative importance of the welfare and financial impact of the establishment of identical legislation under any one of these three branches would not be the same in different countries. The demographic pattern varies considerably among countries and this raises further inequities in terms of the relative burden in the application of a standard based upon this welfare concept.

For example, a country such as France with a very high proportion of aged persons in the total population would have to expend relatively

a great deal more on old age pensions than a country such as Japan with a very low proportion of aged persons, in order to qualify under the same standard established for this branch of social security.

It is conceivable that a fiscal concept of measurement for the purpose of establishing comparability of obligations under any instrument dealing with social security systems might be developed as a complementary feature. For instance, some broad measure of total social security expenditure in relation to national income might be worked out which would provide a better yardstick in comparing the total effort being put forth by various countries at different stages of economic development.

While a fiscal concept might be applied through such a technique thereby enabling certain standards to be established with regard to the

In June 1952 we published an article entitled "A Proposed International Convention on Social Security", and said that a second article would discuss the outcome of the final discussion on the Convention at the 1952 session of the International Labour Organization. Here, at long last, is the second article. The author, director of the research division, Department of National Health and Welfare, successfully completed his work for the doctoral degree at Harvard University this spring, a fact that may partially account for the delay in the appearance of this article!

The statement gives us food for thought in considering Canada's relationship to ILO social welfare recommendations and conventions.

magnitude of the financial burden assumed in the case of such social charges, there would still be room and need, within this general framework, for the application of the welfare concept in order to set up certain quantitative standards relating to other aspects of social security.

But it must be recognized, of course, that these fiscal and welfare concepts relate to standards in terms of quantities; they deal with financial outlays, coverage, qualification conditions and so on. While an international convention may establish quantitative criteria that are particularly useful in the case of income maintenance programs, such an instrument does not lend itself to the establishment of standards relating to the quality of services provided under different social security systems.

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ACROSS CANADA



GENERAL NEWS

Training for Rehabilitation Work

Recognizing the growing awareness of the need for increased study of the rehabilitation of the handicapped, the Unemployment Insurance Commission sponsored a course this summer for special placement officers on the counselling of the handicapped. The course, held at the University of Western Ontario, was attended by 27 placement officers from all parts of Canada. The lecturers were members of the faculty of the University and of other universities in eastern Canada.

Reciprocal Enforcement Agreements

The Ontario Supreme Court has ruled that a magistrate in Ontario has no power to confirm an order for maintenance of a dependent made by a court in another province or country having a reciprocal agreement with Ontario. All provinces and several foreign countries have agreements with Ontario providing for the reciprocal enforcement of orders made by the courts. This new decision upsets the whole scheme, although the matter may be appealed to the Supreme Court of Canada. The case that precipitated the decision was that of John Lewis Scott, and the decision was handed down on June 25, 1954.

For Retarded Children

The Ontario Association for Retarded Children now has 16

local associations affiliated with it. The Association itself has 1,382 members and the local associations have 15 schools in operation with 317 children in classes. Many towns and cities in the province are showing interest in forming local organizations.

John Howard Society in Ottawa

The Ottawa Branch of the John Howard Society of Ontario has begun full-time operations after three years' service on a part-time basis. The director is **F. J. Neville** who has a master's degree in social work and has served in family and children's agencies.

Psychiatric Treatment in Prisons

There is a new psychiatric and neurological treatment service for inmates of Ontario prisons, directed by **Dr. F. Van Nostrand**. Two projects are being undertaken: a special treatment ward for psychopaths will be established at the new Millbrook prison; and treatment will be provided for drug addicts at the Mercer Reformatory for women and the Mimico Reformatory for men.

Foster Care in New Brunswick

A new program for the care of Catholic infants awaiting adoption in the Saint John, N.B., diocese has been announced by the Bishop. The present St. Vincent's Infants' Home will be abandoned

and the infants will be placed in foster boarding homes until such time as an adoption home is found. The Catholic Welfare Bureau, acting as legal guardian of the children, will supply clothing, medical expenses and weekly board for the infants while they are being cared for in the private foster homes.

Adoption Service in Ontario On the recommendation of the Ontario Legislature's committee on child care and adoption services, and of various children's aid societies, Ontario has established an adoption clearance service and central registry. The central service, first of its kind in Canada, will help bring prospective parents in one part of the province in touch with societies in other parts who have wards they cannot place, though families wishing to adopt children will still have to apply to their local children's aid societies.

Miss Laurie Charleson, who has been working on a special project for the York County Children's Aid Society, is to head the new service. She will provide liaison between the societies and give personal assistance in one of the outstanding problems of adoption, the placement of older children.

The central registry and clearance service will form a section of the child welfare division of the Ontario Department of Public Welfare.

Financial Aid to Social Workers The Children's Aid Society of Ottawa is providing financial help for untrained social workers to take professional training. Any employee who has given satisfactory service for two years on the agency's staff may receive \$200 or more a year to help finance a course at a school of social work. In return the

student commits himself to employment with the Society for at least one year after graduation.

Canadians at APWA Conference Several delegates from Victoria and Vancouver attended the American Public Welfare Association's Regional Conference in Seattle in late September. Amy Leigh, assistant director of welfare of the B.C. Social Welfare Branch, Department of Health and Welfare, presided at the opening evening meeting. Marie Riddell of the family division, Martha Moscrop, training supervisor, James Sadler, regional supervisor (all of the Social Welfare Branch), and William Dixon, associate professor in the British Columbia School of Social Work, took part in a variety of discussions sponsored by the Conference. Marjorie Smith, director of the B.C. School of Social Work, spoke on "Concepts Common to all Categories of Services."

School for Teachers of Maladjusted Children A one-year-and-a-half training program for specialized teachers who will work with maladjusted children has been established in Montreal under the *Centre d'orientation*, directed by Father Noël Mailloux. This has been made possible through a fund of \$50,000 supplied by the Montreal Richelieu Club. The course will include study of personality development, therapy in institutions, special school teaching for maladjusted children, research and observation. Field placement for at least six months will also be provided. Graduates will probably be employed in youth training schools in Quebec, and salaries promise to be equivalent to those of teachers employed in technical schools.

**Child
Labour**

The research service of *La confédération des travailleurs catholiques du Canada* has established that there were in April, 1953, 10,257 children of school age (under sixteen years) working in industries of Quebec. These children were holders of working permits: 6,600 of them were boys and 4,500 girls.

**Maintenance
Order in
Manitoba**

The City of Winnipeg has entered an appeal against the maintenance order set by the Rate Establishment Committee for Manitoba. The order, covering board, clothing and administration or supervision, was for \$1.70 a day for each child committed to the care of the Children's Aid Society of Winnipeg.

**Recommendations
to Tremblay
Commission**

Among many briefs presented to the Royal Commission on Constitutional Problems in the Province of Quebec was one from the Catholic Hospitals Association recommending the creation of an advisory board. This would bring together the government, hospitals and representatives of the community to coordinate health and welfare activities.

The Classical Colleges of the province advised the Commission of the need for a government allowance of \$100 to the parents of a child who had gone beyond grade seven and who is attending high school or col-

lege; they also asked for an additional allowance of \$100 if the child must be boarded while he is at school.

A conference on Indians and Métis was held under the sponsorship of the Welfare Council of Greater Winnipeg from October 6 to 8. Delegates from universities, church mission boards, missions, governments, cooperatives and churches from Saskatchewan, Alberta, British Columbia, Ontario and Manitoba, were present. Lieutenant-Colonel H. M. Jones, director of the Indian Affairs Branch, Ottawa, was the principal speaker.

Our English friends, with a long tradition of welfare services, do not overlook the possibilities of aid to animals. Our Dumb Friends League (for animals, that is) provides "grazing for convalescents". The National Council for Animal Welfare "aims at the recognition of the relationship of all living things and the progressive emancipation of the animal kingdom from exploitation." Nor is this concern for animals limited to those of English origin. The People's Dispensary for Sick Animals of the Poor has branches in Egypt, South Africa and Tangiers. This information comes from *The Annual Charities Register and Digest*, 1954.

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**Conference
on Indians
and Métis**

PROBLEM DRINKING AND SOCIAL WORKERS

By MARGARET CORK

"PROBLEM DRINKING" has been with us far longer than the profession of social work. Throughout many ages other professional groups, notably the medical and the clergy, have struggled with little general success to find a way of helping those involved in problem drinking. With the beginning of professional social work many social workers added their efforts to those of the other helping professions but with the same sense of failure to both patient and therapist.

Then Alcoholics Anonymous came along about twenty years ago, followed by the work of the Yale University School of Alcohol Studies. From these we have gained a body of knowledge and understanding which has enabled thousands heretofore neglected, rejected or overlooked to become rehabilitated or, in medical terms, to find not cure but recovery.

Here in our own community medicine slowly began to apply these new tools and skills; industry became acutely concerned; reform institutions started programs of rehabilitation, and education has shown interest in prevention.

What of social workers? Have we as a profession concerned ourselves sufficiently about a problem which is in great part a social one, which plays a major part in the breakdown of family life and is in turn caused in great part by upset, disturbed or negative relationships within the family? I do not believe we have, either to the extent that other service professions have, or to the extent that is necessary if we believe that this illness is not to be treated purely

as a physical one but as one in which the person is also emotionally, spiritually and socially ill.

Since the Ontario Alcoholism Research Foundation came into being social workers appear to have lagged behind the other service professions in making use of the knowledge, skills and treatment offered. During the past year only three social workers used the Foundation on a consultative basis, and out of a total of 576 patients referred only 22 were referred by social agencies.

Obviously this challenge is not meant to imply that individual social workers are not actively concerned, nor is it meant to imply that the problem is to be solved by social workers alone, or that all the 49,000 alcoholics in our province should be referred to one small treatment team at Brookside Clinic. It does imply that social workers should join in a team with other service professions to give that part of treatment which can only be given by social workers, and work with others in a way never used before to achieve the goal that Dr. Gordon Bell feels is possible, namely almost complete eradication of this illness "which everyone hates but few understand".

This then brings us to the subject matter of this paper, which is to define problem drinking for social workers and to show what it means in their work.

Who is the Problem Drinker?

Who then is the problem drinker? How can we distinguish him from other people who drink? Are we as confused in our identification as many in the community who label

anyone who gets drunk an alcoholic? The social worker must be able to differentiate, for purposes of treatment as well as interpretation in the community, between those who drink at all and those who are alcoholics.

For our purposes the alcoholic may be described as a person whose drinking in any continuing or regular way is upsetting the stability of his life or his home; he may be described as the person who is unable to have a satisfying life without the use of alcohol; the person who is unable to face the demands or responsibilities of life without an increasing dependency on alcohol; as the person who is basically insecure and unhappy, seeking to relieve the pain of living through the use of alcohol.

Feelings About Alcoholism

Today as a result of numerous articles most people are paying lip service to the belief that the alcoholic is a sick person. It is one thing to be able to accept this fact intellectually, however, but quite another matter to accept it emotionally. With this is closely mingled or interwoven our inability to be as objective about this as we are about other social ills. There seems to be a relationship between our attitude now and our lack of concern or our inability to give constructive help in the past.

There does not seem to be any clear cut reason for this but perhaps there are a few factors worthy of consideration, any one or all of which may be responsible: our cultural, historical or individual conditioning to the use of alcohol or to drunkenness; our preconceived, and still active, ideas of its being a moral problem or one which demands a moral judgment of the sick person, such as historically we gave to relief

recipients or consumptives; our conflict about the place of alcohol in our culture or our individual lives; our fears, conscious or unconscious, about the relatedness of *any* drinking to alcoholism; our very lack of knowledge and experience of an illness so different from all other illnesses.

Characteristics of the Illness

At this point I should like first to consider this last factor, namely, how this illness differs from others. It differs from others in that, except for the acute stages, the person is up and about; he has no well-defined pain or diseased area; he is often successfully carrying on with a job that calls for skill and training; he is sometimes managing to carry responsibility in the home.

In this illness, in contrast to others, both the ill person and the community resist recognizing it.

It is an illness that brings feelings of shame to the family and causes them to resent, ridicule or ignore the suffering person; that causes feelings of guilt, remorse and self-condemnation in the sick person himself. It is an illness that increases the sick person's feeling of inadequacy, depletes his slight store of self-confidence and adds new fears to those that were in part responsible for his initial dependency on alcohol.

Where do we see another illness in which there are so many relapses

Margaret Cork is psychiatric caseworker for the Ontario Alcoholism Foundation and is doing outstanding work at the Foundation's Brookside Clinic in Toronto. This article is an adaptation of a paper given before the institute on alcoholism at the Canadian Conference on Social Work, June 24, 1954.

or acute stages? An illness which makes a person lie, steal, cheat, hurt those closest to him, or throw away all that seems to be of value to other people? Where do we find another illness in which the ill person has to give up the only thing that has seemed to offer him release from pain and security in life in order to get well? It is an illness that affects the total person more than any other illness, and yet in which the sufferer more strongly resists or denies the need for help and tends to believe, or tries desperately to believe, that he can cure himself.

Alcoholism is a complex illness that has many hidden aspects, and only one readily recognizable aspect—the regular or periodic drinking bouts—an aspect which looms so large, creates so many problems in and of itself that it is small wonder that families, the public, and often those who are trying to help the alcoholic, see alcohol as the one cause of alcoholism and never get far beyond this.

The patient is considered ill only when he is severely intoxicated and the tendency is, between bouts, to act towards and expect behaviour from him that we would expect from a well person. The very fact that his behaviour between bouts so often has a pseudo-wellness to it fools us again and again into believing that he is capable of responding normally to the demands and pressures of society and his family and those who may be trying to help him.

What Is the Alcoholic Like?

Behind the pseudo-wellness, the rather likeable, interesting personality, the abilities and relative degree of success on the job, the above-normal or average intelligence, what do we see? We see, more often than

not, a very dependent person who has come into adulthood ill-prepared by his earlier experiences in life to cope with adult experiences; a person who finds it hard to relate to others, who has few inner resources, interests or hobbies, who is easily upset, hurt or frustrated, and who acts out his impulses; a person who has little self-confidence, who is overly concerned about what people think of him and who has fears real and imagined about his place in life and other people's affections—in short, a person who is emotionally immature and insecure.

How Do We Help Him?

So much for our understanding of the sick person. How can we help this person? Above all we must respect him as an individual worthy of help, no matter what condition he appears in. (Florence Hollis has said "one has to like people very much and be convinced of their essential dignity and worth as human beings in order to get past the dirty and unlovely exteriors of some clients").

We must meet his request for help quickly, with warmth and readiness to give help; we must be able to let him know quickly that we like him and understand his desperation and his mixed feelings about coming to us for help; let him know that we understand his conflicts about treatment or about giving up the one thing that has given him comfort and release from tension; we must recognize the fears he brings, fears of having to give up his independence, fears of being further rejected, condemned, or fears of what is going to be done to him.

As with the disturbed child we may need, in the initial stages, to give words to these fears and feelings, so that he knows that *we* know how

he is feeling before he gives in to the impulse to run away. If his need to leave or withdraw is great because of coming to us under too great pressure or because he still is unable to face giving up alcohol, we must be able to help him leave with just as real a sense of our interest in him as though he were going on, and with some real awareness of the ways in which we can help him when he is ready to come back.

Often this recognition of his right to make his own decision, along with the warmth of his reception, is the turning point in his thinking about himself and his problem, and even though he may not come back for a month, or even a year, he more often than not does come back.

Lastly, we must be aware that often the problems that he presents first may be very threatening social or emotional problems incurred as a result of his drinking. Only when these have been met and he has some tangible evidence of our desire to help him can he move on to consideration of his real or basic problem.

Here then are some of the necessary factors involved in helping the ill person to begin to use help, either ours or that of someone else to whom we may refer him. What is involved in the continuing contact? First of all we must recognize that the contact is likely to be a long supportive one, involving endless patience and countless interviews which may have to be maintained whether we refer him to a clinic, a physician, a clergyman or to Alcoholics Anonymous.

Just as in a clinic setting where the patient needs, and is encouraged, to form relationships with a variety of people (in spite of the fact that one particular person may be re-

sponsible for his formal treatment) so in the community he needs several different sources of support. We must slowly be able to help him to move out to and make use of these other sources. Unless we know them well and believe in their ability to help him, whether it be clinic, physician or clergyman, we cannot truly help him lose his fears or make the best use of such contacts.

A continuing relationship with an alcoholic presents unique difficulties and hazards, elsewhere encountered in some respects only in work with emotionally disturbed children. (In no sense, however, does this mean he should be treated as a child or that the relationship can be the same as that with such a child). We must, however, understand and expect that the alcoholic will come to his experience with the social worker full of mistrust and fears, and with a constant need to test out our interest in him.

This means, therefore, that we must not only move out to meet him more than half-way but we must be prepared to sustain a warm, less formal, more flexible relationship than is normal to other professional relationships.

The relationship must be one in which he can readily see and feel our love and respect for him no matter what his behaviour; which can accept his broken appointments, the broken promises, the distortions of truth, the relapses, the swings of mood and the overt hostility toward us when we don't or cannot do as he wants us to; which imposes few limits and which allows him to see us, when possible, whenever he needs to.

Slowly, very slowly, within a relationship such as he has not likely

experienced before, he may become able to proceed from the known to the unknown; he may not only gain a new understanding of his illness but become able to control it; he may begin to regain, or find for the first time, a sense of his own worth; he may begin to face reality, to solve some of his social and emotional problems; he may, in short, begin to gain satisfactions and joys from a way of life that is not dependent on alcohol.

Indirect Help

No definition of this problem would be complete without a word about the indirect help that can and should be given. This may be done (with the patient's consent) through interpretation to employers or others in the community. More often it is with the wife and family of the sick person. This is not just a matter of interpreting the ill person or his behaviour; in fact very often such a method, if used first, only brings greater resentment and greater resistance to changing the attitudes which, though they do not cause the alcoholism, play a very real part in relapses or continued drinking.

We must bring to the wife some of the same understanding of *her own* problems as we do those of her husband, recognizing that wives of our patients very often have great needs of their own, which may in part have led to their marrying a sick person in the first place but which certainly have increased and been exaggerated through years of living with him.

We know, for instance, that she more than likely brought to the marriage great dependency and affectional needs, as well as a good deal of conflict about sex. (Incidentally withholding of the sexual relationship is the most often used, as well as

the most often carried-out threat, used by wives towards their sick husbands. We can readily see how this affects the sick person as well as the total marital relationship). She came to marriage with her own needs only to find that she was denied the satisfaction of them because her husband's needs were too great.

A wife's own emotional dissatisfaction, the demands to meet his needs, the unpredictability and shame of his behaviour, the constantly recurring social problems and the growing disturbance of the children, have left her physically and emotionally depleted.

As we see her she is full of mixed feelings, fears and attitudes, and reluctant to give up the adjustment she has made to her situation, by which she has become dominating, nagging, threatening, punitive or indifferent. In some instances she has subtly encouraged his drinking because of her own needs or fears. Sometimes she demands or almost dares those helping her husband to succeed where she has failed and at other times begs us to work a miracle.

Sometimes, too, she is desperate for help but has as many resistances to using it as the sick person has himself. There is little positive value in trying to gain her cooperation in the patient's treatment until she feels our genuine interest in her as a person separate from her husband, and sees tangible evidence of our ability and readiness to help her with her own very real problems.

In the initial stages a wife may only ask for, or use, specific direction as to what she should do in such matters as taking a drink with her husband, pouring the liquor down the sink, protecting him from the

results of his drinking, feeling ashamed of him, or reasoning with him when he is intoxicated (to all of which the advice is "don't"). She may at first only use her relationship with us to get rid of her extreme anxiety and hostility. However, as she feels the worker's acceptance she will be able to begin to work more positively on the total problem.

When a trusting relationship has been established help should be given not only towards gaining knowledge of the illness and its formal treatment, but also towards her own attitude about drinking, about the illness and the man she cares for.

The help should have as its goal not just rehabilitation of the sick person but also a lessening of her conflicts, anxieties, tensions and frustrations, so that she can lead a more satisfying life with or without her husband's recovery, more adequately meet the children's emotional needs so that they will be as little damaged as possible by the fact of having a father who has the illness, alcoholism; can make a decision to separate or stay with her husband, not in anger or desperation, but having worked through her feelings on the matter with someone who brought to it a measure of objectivity.

Most wives, it has been found, do not really want to leave their husbands even though they threaten to do so or appeal to us for help in doing so. When she first comes for help a wife is usually just as divided in her feelings about leaving her husband as the patient is about giving up his alcohol.

If, however, she is determined to do so, our acceptance of her decision, and a thoughtful appraisal of what is involved in separation, may often help her to face realistically the im-

plications of a life on her own; may help her to recognize her true feelings in regard to her husband as well as her desire to try, with help, to find the way to a more satisfying, or at least a more tolerable, life together.

The most difficult things for a wife to accept emotionally are the fact that her husband's behaviour is the result of an illness rather than a lack of affection for her; the fact that his sobriety alone will not likely end all her problems or bring the satisfactions they are both seeking in their marriage; the fact that the children have been as much, if not more, affected by the difficult parental relationships and their mother's hostility toward their father, as by his excessive drinking. As she becomes more sure in her relationship to the worker and the tension in the home relaxes she may look for indirect help with the children and the problems they are presenting.

At times, the adolescent children may have become so emotionally upset that they also need direct help to gain an understanding of the illness and their own feelings about it. Often a mother tries sincerely to give the children an interpretation of the illness, and tries to help the children see their father as an ill person, but her own hostility and ridicule of him when he is drinking leave them more in conflict than ever. Only as a mother or the children or both, are helped to find emotional stability can we hope to prevent their becoming the emotionally ill or possibly alcoholics themselves.

Women Alcoholics

What of the women who are themselves suffering from this illness? So far I have talked about men, for the most part, because so far as we

know only one in six of those suffering is a woman. Our experience and knowledge is gained primarily by working with men. However, most of what I have said would apply to women who have this illness, with a few possible exceptions.

One exception is that the illness appears worse in a woman patient, and it is more difficult with the knowledge we have today, to rehabilitate her. Why this is so has not been scientifically shown but it seems to be related to such factors as her ability to hide her drinking longer and thus become more ill before she seeks treatment.

Another exception is that there is additional guilt and shame about her drunkenness because of her place in society as a woman and a mother. Another is that she may have difficulties in having a satisfying relationship with a member of the opposite sex. And lastly, (in contrast to most women, who stick to their ill husbands) the majority of men who are married to women alcoholics seem to leave their ill wives or, if they do not leave them, seem much less able to seek or use help in understanding the illness or the ill person.

Attitudes of Social Workers

This definition of problem drinking and its meaning to social workers would be incomplete without a look at our own attitudes which were mentioned earlier. How do we really feel about people suffering from this illness, and are we able to recognize we still may have feelings that are affecting our ability to help them?

Do we so hate, and are we so repulsed by, the effects of the illness that we can't help transferring our feelings to the person who is ill?

Do we, even with our own intellectual knowledge and outward acceptance of this illness, have so much feeling about the use of alcohol in any way that, under the guise of helping the ill person, we react unconsciously, as does society, in a punitive, authoritarian or moralizing way? These are questions which each of us can answer for ourselves, but positive help for the person suffering from alcoholism depends in great part on our answers to them.

* * *

To sum up, the problem may be defined according to our knowledge and understanding of the illness, of the ill person, and of treatment methods; of our best casework skills given with a warmth and reaching-out beyond what is called for in other relationships; of our freedom from basic prejudices, misconceptions, fears and moral judgments, as well as from any personal problems relating to the use of alcohol.

Last, but not least, it is defined in terms of a personal faith in the redeemability of every human being, so that we ourselves may not give in to the feeling of hopelessness so often engendered by the sick person as well as by society, so that the person suffering this illness may be enabled to find through our recognition of spiritual values the way to his own, without which he will never be completely well.

In the life of the individual, as well as in the life of communities, self-help and help from the outside both play a vital part.

—J. F. de Jongh, *School of Social Work, Amsterdam, at the International Conference of Social Work, 1954.*

INA AND THE PEOPLE OF SIAM

By INA DICKIE

My friend has written from Canada, "I envy you the opportunity to think about public health away from our standardized ideas." This remark hardly applies here in Bangkok where, encouraged by the Thai government, a virtual Niagara of western ideas has been pouring in. Here, among the Buddhist temples, the alphabetic agencies such as ECAFE, UNESCO, FAO, FOA and USIS are everyday words. I add two more: UNICEF and WHO, the two which I know best as a World Health Organization Public Health Nurse, working in a maternal and child health project supplied and equipped by UNICEF.

I Am Offered a Baby

One day recently, while returning from a visit to a village, I pondered over my friend's remark again. I was at the site of an ancient civilization, the famous Buddhist temple at Nakorn Patom, sitting beneath the spreading boughs of that Buddhist symbol of meditation, the Po tree. I was looking at the huge golden Buddha shining in the noon sun.

The leaves above me had the same constant gentle flutter as have our Canadian poplar leaves. I had eaten well of our picnic lunch of Thai foods, and the drowsy drone of the flies which had shared my food was making me drowsy too. Then a woman came to me and offered to give me her lovely month-old baby! My peaceful moment was past.

"Why do you want to give me your baby?" I asked in amazement, through my friend and colleague, Kun Surabhi.

"Because you seem kind."

"I shall be really kind only if I leave this baby with you, its mother."

We both smiled, and she went away. If I had agreed, would the mother have given the baby up? I don't know. But the incident sets me thinking. What do I really know about the minds of these people with whom I have worked closely for two years?

"An Ill-favoured Thing, but Mine Own"

A few days before, as we passed a shop on Bangkok's main street, I had seen a little girl sitting alone on a doorstep. Her cotton shirt was pulled back so that she might offer her flat little chest to her "baby". She was unaware of the world shrieking by in noisy trucks and buses. Tenderly she held her doll, unaware, it seemed, that her celluloid baby had been flattened, perhaps by a passing truck. It was hers, and she loved it. To me she expressed the feeling of Thai mothers I have met. Yet innumerable children have "guardians", not parents. A child may be given to a benefactor or claimed by a relative; among the very poor, it may even be sold.

We haven't yet caught up with Ina Dickie. She sent this article from Bangkok. Then we had a brief letter and some pictures from her, post-marked New Delhi, India. She said she was on her way to Canada to spend a year, and we are still waiting to hear whether she has arrived and where she will be staying. Anyhow, her article speaks for itself—and for Miss Dickie.

From Palace to Health Project

Kun Surabhi had left me and was kneeling before the image of Buddha. She lit a joss stick as she made her prayer. A leader among nurses, Surabhi herself had a guardian after the death of her father. She was reared in the household of the spinster daughter of a King of Thailand. But the princess' ideas were already tinged by her contact with the West. Surabhi was brought up within the palace and learned all about the intricacies of Oriental court life; but she was also taught to play games traditionally thought unsuitable for girls.

Years later, Surabhi, graduate nurse, skilled x-ray technician, and competent secretary-typist, turned to the homes of the people. After a year of study in England on a scholarship arranged by WHO, she came as chief nurse to the Maternal and Child Health Project. There I found her.

Lots of Brothers

To begin this work, with Surabhi came more than twenty young graduates from the local schools of nursing. Pranee, Sunee, Yupara, Vena and the rest. Pranee! It is difficult to believe that this competent young nurse was until recently under the strict supervision of her parents. During three years in the school of nursing, she could leave the hospital in the evening only if escorted by a father or brother. Let it be said for the ingenuity of these pretty girls that they do seem to have a lot of brothers!

Now here she was venturing forth into the crowded lanes of the city, nursing and getting herself loved and respected by people who also, two years ago, thought it strange to see a nurse in uniform at their door.

When I met these girls for the first time, I knew I had only two years in which to trade their knowledge of their people for my knowledge of the technical problems of nursing in public health. More than that, we must together pass on our training to others: village girls who were learning to be midwives; nurse-midwives who had not gone beyond the hospital or the clinic and now must work in the homes; student nurses who must learn something of public health as part of their training, and so on.

Bangkok Is a Lot of Villages

We work together in home, school, and clinic. As I go about with Pranee, I soon realize that the few thousand foreigners from the West living in Bangkok are but a drop in the local klong (canal) compared with the more than a million inhabitants.

Behind the increasing number of modern shop facades, life goes on much as usual in any village. The world is one of lanes, of footpaths, of houses built on stilts with narrow boards as bridges over narrow klongs. Such are these latter that within our WHO team we have a pact: she who drops in the klong as the crossing is made on a single teetering board is to get no help. If she falls, she is to stay there in the mud and slime. She won't be worth saving.

Learning from a Kitten

Beside Pranee, I am very tall. My hair blows about in unruly fashion; she remains completely unruffled. My feet—but I cannot discuss my feet. I learned that one day when, according to custom, I had slipped off my shoes on entering a home. When I was about to leave, a playful kitten approached me and rolled over. I gave it a wee tickle with my big toe.

Pranee quickly murmured, "You can't do that." I then caught the kitten up and held it against my shoulder. Everyone beamed! So I learned that the head is 'high' the foot is 'low'. In olden times, the King was never addressed. Even his foot could not be addressed. His people addressed the dust under his feet.

Through Pranee I have seen the life of the Thai family, and the difficulties of nursing in these circumstances. Together we spent a day in the huge Bangrak Market, immunizing all comers. Through her, I met Nang Chalam, who could not walk; the four crippled children of Nang Muang; and I met Grandma Chaluay, too.

A New Kind of Business in the Market

The family in Bangkok goes to market every day to buy the bits of fat pork, fish, vegetable, or condiment for curry to eat with the daily rice. Though Thailand has fine fruits, the average family does not buy many, perhaps a small cheap banana for the baby, but not more. Mother visits the market early in the morning or late in the afternoon. Since everyone goes to market, we go also. We set up our immunization clinic in the sunny lane, and work hard—smallpox vaccination, cholera vaccine, diphtheria toxoid.

The market itself is a steaming jungle of fish with cold staring eyes, green vegetables, coconuts, and fat pork slithering over wooden tables, raisined with flies. Light does not penetrate the rafters overhead; underfoot all is wet and slippery. Out in the light along the street is a glorious array of orchids, roses, and jasmine, along with the lotus buds and tuberoses.

November 1, 1954



Visiting by sampan along a klong.

"Let's go inside the market. We'll vaccinate the people as they pass the stalls," I suggested.

The smile and the hint of fun in Pranee's eyes tell me she is a willing ally, so off we go. The nurse's smile and the jovial banter of the Chinese butcher boy, who joins in the game, and the good humour of the Thai people all around bring results.

We go to See Nang Chalam

To see Nang Chalam we went off Charoen Krung (New Road) and drove into a lane of fine houses and gardens. A very blond little boy went by on the paved lane with his Thai amah. Then our vehicle came to an abrupt stop as the road ended. On foot, we turned left and in a minute were back in a village. A black bird on a perch called out the Thai equivalent of "When do we eat? Yes, Yes, Yes . . ."; a boy sang of a young man's love for a country maiden who was all that is wonderful, as he rocked his baby sister to and fro in the hammock that is the Thai cradle.

Among the grass-covered huts we found the house of Nang Chalam. She is still under our care, though her baby delivered at home by the nurse-midwife is now three months old. Nang Chalam is not yet fully recovered from acute beri-beri, caused by

deficiency of Vitamin B in her food.

Nang Chalam's home, one room built high on stilts, is bare. This may seem miserable to you. It is not. The clean bare boards are cool and uncluttered. The house built on stilts gets cool air from beneath. Coming from the intense sunshine, I found this refreshing. Nai Plod, her husband, was at home, loosely and comfortably clad in his loincloth, but he put on a white shirt when he saw us. He told me he drives a samlor (bicycle rickshaw), which he rents. He must pay the rent daily even if there is nothing left to bring home. This is a common story. So is beri-beri in this land of plentiful food.

Beri-beri in Thailand results from a diet of highly polished rice which Thais love, with too little of the other essential foods. The child is affected almost from birth, but acute symptoms may not appear until later. Mrs. Chalam began to feel numbness of her legs only when pregnancy brought an even more restricted diet: the old belief is that a pregnant woman should eat only rice and dried fish. On this diet she lost the use of her legs entirely.

She Can Walk Again

Nurses working near her home heard of her and persuaded her to see our physician at the clinic. She was treated for beri-beri and was delivered at home by a competent nurse-midwife trained in the Project. She could not walk properly until four weeks ago. Even yet her face was pale and tired. With the help of Pranee and others, and with continual medical care, she had nevertheless successfully nursed her roly-poly baby. Only when she talks about her baby does her face light up. She and her husband listen attentively to Pranee's explanations. They

have learned a lot in the past few months about what they can do in their own homes to avoid all this misery.

With a Canadian Accent

The presence of a farang (foreigner) in the lane is the signal for children to collect and to follow just to see what this odd person with the long nose is up to. I speak English to them slowly, which sends them off into peals of laughter. Then a braver child will repeat what I say, word for word, and with a Canadian accent! The rest take up the chorus. Sometimes I find that even my casual remarks to the nurse will echo back to us from our young friends. Weeks later we may return to be greeted with "O.K. Thank you, good-bye".

A Little Crippled Girl

Pranee's interest in helping people has opened her eyes. At a wayside stand an elderly woman was chopping red peppers for curry. At her side Pranee saw a girl crippled by spinal deformity.

"Where do you live?" asked Pranee.

The child looked frightened but did not reply. The old lady pointed wordlessly to a narrow path.

We found a mother, whose eyes are the saddest I have seen in Thailand, where faces smile even when hearts are weary.

"I have six children. Four of them are as you see this one, whose name is Dang. When they were born they seemed all right, but at about a year of age each became crippled. I have always cared for them myself. I do not know what has happened. I have sent two of them to school, and they like to learn. But the children laugh at them and even the teacher wants to know, 'Why are you like this?'" The tears spilled over as she spoke.

Pranee and I talked it over. What can we do? We make no promises. Go slowly, Pranee, do not frighten her with our modern magic. She feels your kindness and interest, but she is not yet ready to expose the children to strange eyes at a modern clinic. The mother and father will first come for x-ray, because both Pranee and I have seen too much of such destruction of children by tuberculosis.

The mobile x-ray unit supplied by UNICEF comes to our centre each month, so that is easy to arrange. Later, when the parents are ready, the children will be examined. Only then will we really know what can be done.

Grandma Knows Best

Then there was Grandma Chaluay, in an old-fashioned pantaloon panning. She had only recently got her title. Her nineteen-year-old daughter had been delivered in her home of a fat baby six weeks before. Grandma's hair is cropped very short, and her teeth are black from chewing betelnut. The address on her record says "Behind the abattoir".

Pranee led me through the abattoir, where dozens of steaks stood on the hoof. Underfoot was slippery, and as we crossed the narrow bridge over a stagnant klong, I prayed for steady feet. Pranee, however, knew exactly where she was going. In no time we were among a cluster of friendly atap-roofed houses in the middle of a pomelo (grape-fruit) orchard.

Neighbours called greetings as we went into a poor home, divided into two rooms by a frail partition. The front of the house was open as in a stage setting.

"How is the baby?" Pranee asked the mother, Nang Malee.

Grandma made a reply.

"Does the baby nurse well?"

Again Grandma replied. Try as she might, Pranee could not get Malee to talk. Later, to me, Pranee remarked, "Malee is a dutiful daughter; she knows her place."

Grandma nevertheless listens attentively to this young nurse. Have they not much in common? Both made sure that baby arrived safely; now each is determined that it will be strong and healthy.

We notice that the cupboard is bare, but Pranee assures me that this is usual: the daily marketing has not yet been done. But they must discuss seriously the fact that, of seven people living in the home, only one works, and that for very little pay.

As we went down the lane, the girl-mother came laughing after us, to make sure not to miss what might go on if we went into a neighbour's house. Surely one's baby is not a personal possession, but one to be shared with the whole family. Grandma, as head of the household, has first claim, but also first responsibility.

They Learn—and So Do I

When you visit Bangkok, you will learn how the sun beats down unmercifully upon bare heads; how the rain pours down suddenly, leaving the paths a mass of sticky mud; how the uniform so crisp at early morning becomes limp and damp an hour later. If you come with Pranee and me, I think you will understand too why this new service has gained such ready acceptance among people who daily face disease and death in ways we no longer know in Canada.

Whatever ideas I have brought, I will take away many more from Thailand.

PROGRESSIVE PENOLOGY IN NEWFOUNDLAND

By J. ALEX. EDMISON

SALMONIER Prison Camp is situated about sixty miles from St. John's. It is in typical rugged Newfoundland backwoods country. Of its total area of 577 acres, some 75 are now under cultivation with present plans calling for the clearing of 25 additional acres a year. It is bordered on the north by Oxley's Pond and on the south by Gull Pond, waters well-known to discerning fishermen. Neat barns and other buildings stand out above the trees and streams.

Here what might be mistaken for a well-run holiday resort is a penal establishment ranking among the best and most economical anywhere. It has been in operation since 1938.

Recently, I spent a very pleasant day with Sergeant Warder Frank Coates, his seven warders, and his fifty inmates. There are no bars or walls or guns. There was also an obvious lack of what has been called prison tension. Custodial precautions are superfluous at Salmonier because escapes are unknown. Inmates sent there by Governor William Case of Her Majesty's Penitentiary in St. John's have been carefully screened. The length of term is unimportant, as sentences served at Salmonier are from 30 days to life.

Mr. Case, who since 1944 has been in charge of both institutions under the Department of the Attorney General, tells me that a very high percentage of all those committed to the Penitentiary spend at least part of their sentences at Salmonier. It is a cherished reward for good conduct in the Penitentiary to go "on holidays" to the Prison Camp. This earned privilege is also open to the

Federal prisoners, of whom there were 27 in the provincial penitentiary when I was there.

The warders in barn and field chat with their charges like friendly and understanding foremen. Governor Case is justifiably proud of these staff and inmate relationships. Since my visit he has written to tell me of a recent example:

A farm warder was working on a far section of the Prison Farm adjoining the Salmonier road, approximately seven miles by road from the Camp, when he was taken seriously ill. One of the inmates went to the nearest telephone, which was about one-and-a-half miles distant by road, to summon assistance. Another inmate went in another direction, through heavy timber, about two miles to the edge of the Pond nearest the camp, where he lit a fire, which is the signal that the Prison Camp boat is required. When help arrived from the Camp, they found one inmate looking after the Warder while the other inmates carried on with the planting just as though they were supervised by the Warder. This is not an isolated incident but typical of the cooperation existing between the inmates and the staff.

Full Employment

There is full employment for all hands at Salmonier. I found it to be a hub of activity. Land clearing and road building go on constantly. New buildings are under construction. Cultivation processes employ many, as do the prized live stock departments. All this industry is purposeful.

Most of the inmates come from the ranks of unskilled labour and special efforts are made to teach them agricultural and other trades

which will ensure them jobs on release. Inmates I talked to took pride in the Yorkshire pigs and the Holstein cattle, the best, they said, in the whole of Newfoundland. Milk, eggs, meat and vegetables are supplied for all the needs of both the Prison Farm and the Penitentiary. Surpluses are sold.

All fuel for heating and cooking is provided on the Salmonier site. Since all electrical installations and the complete water and sewerage system have been done by inmate labour, it is easy to see that this Prison Camp is operated on a most economical basis.

A New Discipline

Corporal punishment? Governor Case seemed startled when I presumed to ask this question. He replied, "Of course not! It was abolished in Newfoundland a good many years ago. We know how ineffective it is."

The folk in Newfoundland are practical. They seem to be able to cut 'red tape' and get things done. Take for instance the problem of the inmate cook at Salmonier. I can testify as to the excellence of his culinary skill. However, he was about to be released and it seemed a shame to turn loose such an outstanding chef on the free world.

Deputy Attorney General H. G. Puddester, who accompanied me on my tour, was informed of this approaching crisis. He and Governor Case went into a huddle with the inmate. The problem was quickly solved by signing up the cook for the Prison Staff—his new status to take effect on his release date, 25th June.

Just A Beginning

Attorney General the Honourable L. R. Curtis and his associates realize that they have developed something pretty fine at Salmonier. However, they are far from complacent about it. Improvements are sought for. Recently they authorized a two-storey recreation building and a new staff house.

More stress will be laid on raising the educational level of the inmates, something which has been done with marked success at the Penitentiary in St. John's. Sergeant John Fagan has come back from the Penitentiary Staff College at Kingston with a host of new ideas on classification and counselling. I know that his recommendations will receive sympathetic attention in the proper quarters.

And what is the best tribute that can be paid to the Salmonier Prison Camp? Let it come from Oliver J. Walling, the Director of Corrections in the Department of Public Welfare, under the Honourable Dr. Herbert Pottle. Mr. Walling tells me that the atmosphere and training at Salmonier are such that the discharges go out into the world "most rehabilitation-minded". And, what is very significant, their recidivist rate, Mr. Walling says, is "extremely low".

All in all, other Canadian provinces interested in open prison farm set-ups might well send their penal authorities on an excursion to Newfoundland. They will come back with more than just an appreciation of warm hospitality and majestic scenery.

Adequate Housing—Does It Make Better Citizens? Address by Dr. Albert Rose at the Canadian Conference on Social Work, 1954. Available on request from: Community Planning Association of Canada, 169 Somerset Street West, Ottawa.

THE CHURCHES AND THE NON-SECTARIAN AGENCIES

By STANLEY P. DAVIES

TODAY, as throughout their history, non-sectarian agencies are positive, not negative, in their attitude toward religion and the church. They uphold and they apply a code of human and social values and of principles for the good life that harmonize with the fundamentals upon which our best religious concepts are founded. There is no basic conflict here and there is no reason for it.

And yet let's face it. With many notable exceptions, especially among the great leaders of our faiths, there is a serious lack of understanding between the clergy and the churches on the one hand and our professional social workers and agencies on the other hand. There is no one simple answer that can explain or describe this. Many divergent views and attitudes exist among the churches and churchmen.

At one extreme there may be a projection of the old conflict between science and religion: many churchmen view the modern professionally trained social worker in the secular agency as a devotee of everything that today's psychological and social sciences have to offer and contrariwise, indifferent or antagonistic to religious concepts and spiritual forces.

At the other extreme some clergymen are so intent upon incorporating all the latest psychological knowledge into pastoral counselling that they feel quite capable of doing the whole job and see no need to call upon the social agency. Even clergymen who are not in this last group may feel that the growing emphasis in social work upon skilled counsel-

ling of individuals and families with problems other than economic, having to do with marital and parent-child relationships and other personal and social relations, is invading their time-honored province of family counselor.

In a still more down-to-earth aspect, the clergyman may feel—and I fear with justice many times—that when members of his flock come under the ministrations of a social agency, he and the church and the role they may play in the whole process are overlooked or ignored.

The lack of understanding works both ways. The social worker on his side may well feel that altogether too many of the clergy fail to reach out and learn about what social agencies in their modern role really have to offer. It is true that such lack of information is all too general—and this is a challenge to social work and its interpretation.

Nevertheless the clergyman is not just any person. He stands in a special advisory role to his people, particularly in time of trouble, and he owes it to them to know community agencies and the service they can render. Too often there is unwarranted scepticism about social agencies on the part of the clergy because they do not know them.

In facing these difficulties, I should like to say first, after more than thirty years in social work with a wide acquaintance among social workers, that social workers are certainly not irreligious, godless souls without a sense of spiritual values. For the most part, as I have known them, social workers have active church connections. As to those who

make no explicit religious profession, I have known them as being quite generally highly dedicated people, believing in and practising ideals in harmony with those of organized religion. . . .

Must Increase Understanding

The problem then is largely a practical one. Like medicine, social work and the ministry are both helping professions. Without question social workers should bring the clergy more often into genuine partnership in the helping process. And similarly, the clergy should more often call upon the special skills of social workers to serve their people. As with any misunderstanding, the root is in ignorance, each of the other.

Many social workers are not concretely enough aware of the extent to which in his training in the modern seminary and through his reading today's clergyman is intelligently informed about and concerned with psychological and social aspects of human need.

On the other side, a booklet by a leading clergyman on pastoral counselling may be all too typical of an erroneous view which still prevails. This booklet, while assuming that counselling on some of the most involved forms of personal and family problems will naturally be undertaken by the minister, states that it is the cases with an economic angle which normally belong to the social agencies.

Well, I can see social workers bristling over that, when for many decades and most markedly since the last depression and the great growth of public welfare and social security, the private social agencies have more and more directed their skills to the prevention and treatment of many kinds of personal and family pro-

blems for people of any economic group, with fees paid by those able to pay.

It is in this strengthening of the individual's inner resources as well as those of his environment for enabling him to meet the demands and opportunities of living and in the strengthening of the best values in family relationships that the professionally-trained social worker feels he can make his most constructive contribution.

There are two concepts that I think can best guide both the church and social work in relations one with the other. The first is cooperation based on division of labor. Each one of us, I suppose, would like to be so skilful as to be able to minister to all of the needs of the human being. But so vast is today's knowledge, so highly developed are today's skills, that such an aspiration is beyond the limitations of the normal individual. So it is of necessity an age of specialization.

This goes for the clergyman and the social worker. Let's start from the premise that there is far from enough skilled counselling to meet the need and the opportunity for

This article is reprinted by permission from Better Times, the weekly welfare and health bulletin published by the Welfare and Health Council of New York City, 44 East 23rd Street, New York 10. The author, since 1944 general director of the Community Service Society of New York, is one of the truly distinguished leaders in the social welfare field. He is a former president of the Family Service Association of America and of the American Association of Social Workers.

such service among individuals and families. Thus there is ample room and scope for all good counselling and no one profession can claim a monopoly of it.

But let's remember that there is counselling and counseling. There is, for example, legal counsel, psychiatric counsel, social work counsel, spiritual counsel. And each of these, in its own way, is a delicate operation, calling for its own professional skills that the layman, even though he may be a professional in another area, had best not tinker with. The counselling for which social caseworkers are equipped is a skill in itself. . . . Skilled casework counselling is not the handing out of advice based on one's intuitions or hunches. It must begin by understanding as far as possible the origins of and reasons for the person's situation in his personality and experiences—a diagnosis. And in the end it seeks to enable the person to decide for himself what is best for him.

Differences in Training

Similarly, the clergyman has had his post-graduate training in a seminary and in the school of experience for his specialized duties. He has doubtless had courses in psychology, in sociology, and perhaps some clinical experience, to equip him for what lies within the natural realm of pastoral counselling.

It is hardly to be expected, however, that any save the exceptional clergyman will be able to secure equipment in these respects adequate for some of the more involved tasks in family and personal problems for which the professional social caseworker has been especially trained, while at the same time being successful in his primary role of serving the

spiritual needs of his flock and the community.

A highly important consideration here is the social worker's training and experience in evaluating and dealing with the individual's attitudes and emotions not as entities in themselves but in their close relation to the circumstances of the person's family life, housing, health, job, sense of money and use of it, and the like.

The conclusion once again, practically speaking, is that close co-operation based on respect and recognition by each profession of the special knowledge and skills of the other is the relationship between clergy and social workers that will be most productive in the service of human beings.

The clergyman in his role as spiritual leader and counselor, as one who stands in a special place of status and influence with his parishioners, has a continuing relationship with the families of his church. His ministrations are with them in good times and bad, in joy and sorrow, and in some of the most sacred moments of family life.

The social caseworker stands ready to serve upon call at times of special need or strain or complication. The social worker brings to bear as needed both his own skills and those of others. For he knows—it is his business to know—the many and varied resources for helping that are available anywhere in the community. Believing in cultivating self-reliance, the social worker seeks to step out of the picture as soon as the situation permits.

Need a Working Unity

The second of the two concepts that can best guide both the church and social work in their mutual rela-

tions is that of the rounded personality, the whole man. Our modern problem is to bring our specialties together into a working unity that can best serve the indivisible unity of the human being. . . . The more insight we gain about people in working closely with them, the more we become aware that in the last analysis abounding health, genuine happiness, and productive human relations can come only from the inner spirit of a person, his own sense of rightness within himself and with the world.

It is wholly in order then, from a scientific as well as a religious viewpoint, that in our concern for the well-being of the whole man we who are in social work recognize the importance and the potential of spiritual forces in the human being, and having respect for each person's beliefs, feelings and desires, encourage him to utilize the resources for spiritual counselling and strengthening that have meaning for him and that are to be found in the clergy of his own faith.

Thus we in the non-sectarian agencies ask the churches to look to us to assist when problems among their parishioners fall within our area of competence, just as we would call upon pastors and churches as needed resources in the very important area of things spiritual.

What I have said bearing upon division of labor and the concept of the whole man as keys to good understanding and working relations between churches and social agencies would, I suppose, apply in large measure as well within the two great religious faiths which have established their own social agencies, since they also have been concerned with the development of professional

social work through graduate training.

The Protestant Tradition

As regards the field of Protestantism, there is the further question that has been raised from time to time as to whether the Protestants also should develop a full range of social agencies under sectarian auspices. On this point, as a Protestant myself, I can only express the hope that the great forces of this faith will continue to follow their time-honored tradition of strong support of and reliance upon the broadly conceived and broadly serving community agencies of non-sectarian character, which their Protestant forefathers were so largely influential in founding. . . .

The Churches' Inspiration

In its ability to give the individual a faith with which to face these troubled times and to provide the motive power for a better life and a better social order, the church stands pre-eminent. From religion came the primary motivation for the social agencies we have today. From religion, too, have come those great beliefs we hold in common—respect for the dignity and rights of the individual, awareness that man does not live by bread alone, the urge to develop man's inner resources and capacities toward a better and a fuller life.

What greater benefit to mankind could the churches render than to fire the spirits of men with a new zeal for good works that would find expression in something going way beyond the all too lukewarm support now given to these services for humanity?

Concern for the Family

Can we not, do we not—clergy and social workers, churches and

agencies—speak a common tongue as we work toward the goals of the brotherhood of man and the Kingdom of Heaven on this earth? Do we not come wholly together, for example, in our concern for the family as the paramount human grouping in its meaning for and imprint upon the human being?

Are we not equally concerned that the home should have in its housing and neighborhood the kind of physical environment in which the best fruits of family living can flourish? Are we not equally concerned that parents should give of their best to their children, not alone in material things but in unselfish love and devotion, in the cultivation of the best principles of social behavior and of the spirit as well as the mind? In short, is it not in methods and skills that we differ rather than in these basic objectives?

Indeed I know of no common ground where churches and social agencies might more rightly come together to make common cause than in the protection and strengthening of family life. It never fails to impress me deeply when the basic truths of life and religion coming out of the wisdom of the ages are strongly confirmed by findings of the latest scientific studies. Such is the case in the scientific data which Dr. John Bowlby, psychiatrist of the Tavistock Clinic in London, has assembled for the World Health Organization of the United Nations, and published in his recent book, *Maternal Care and Mental Health*.

We Have Done Too Little

We have always believed that the kind of family life or lack of it which the growing child experiences fundamentally determines how that

child will turn out in life. Believing it so completely, we have done all too little about it. . . . Dr. Bowlby states that the origin of adults' being unable to make effective family relationships is not infrequently itself the result of their having been deprived of a normal home life in their own childhood.

Thus the investigator is confronted with a self-perpetuating social circle in which children who are deprived of a normal home life grow up into parents unable to provide a normal home for their children, thus leading into another generation of adults unable to do the same for theirs.

And he concludes:

The proper care of children deprived of a normal home life can now be seen to be not merely an act of common humanity, but to be essential for the mental and social welfare of a community. For when their care is neglected, as happens in every country of the Western world today, they grow up to reproduce themselves. Deprived children, whether in their own homes or out of them, are a source of social infection as real and serious as are carriers of diphtheria and typhoid. And just as preventive measures have reduced these diseases to negligible proportions, so can determined action greatly reduce the number of deprived children in our midst and the growth of adults liable to produce more of them. Yet, so far, no country has tackled this problem seriously. Even in so-called advanced countries there is a tolerance for conditions of bad mental hygiene in nurseries, institutions, and hospitals to a degree which, if paralleled in the field of physical hygiene, would long since have led to public outcry. The break-up of families is accepted without demur. The twin problems of neglectful parents and deprived children are viewed fatalistically and left to perpetuate themselves.

Do we need to look further for a common cause, indeed a great cru-

sade, in which both churches and social agencies can carry into human life their deepest convictions? If it is human personality and human relations we seek to improve, then obviously the place to begin is to see that families are held together through good health and good housing, but even more fundamentally by bonds of love and ties of the spirit.

A Look at the Record

Yet in New York City alone this very day there are over 15,000 children separated from their families, being cared for in foster, boarding and institutional homes, not to mention the thousands of neglected and delinquent children coming before the courts. Divorce rates are high, separations frequent, domestic discord rife. Too often the home is without the spiritual, religious, social and affectional roots which give the sustenance that the developing child above all requires.

This is a charge against us and a charge upon us. How many homes

would not need to come to the point of break-up if the strengthening and helping forces of the churches and social agencies could be more fully mobilized to prevent it! Likewise how many children of today might be helped to become the good parents of tomorrow, rather than neglectful and depriving ones. . . .

Indeed salvation depends upon it—upon the sustenance we can give the family and through the family, children. Whether we think of religious, social or world salvation, do they not go back to the individual and does not the individual in the basic molding of his character and personality go back above all to the family?

Yes, we need more power to do these things we know we must do and for that power to create in human beings the will to make this a better world, social work, like education, government, medicine and other great fields of endeavor, looks above all to the unparalleled force of true religion.

"MAYFAIR" ANNOUNCES NEW AWARD FOR VOLUNTEERS

For the third year, "Mayfair" magazine is looking for entries for its Community Service Award, which was set up in 1953 in order to recognize volunteer projects that fill a community need. The Award goes to that group which is, in the opinion of the judges, most "meritorious", that which achieves the greatest success within its sphere. The project may be large or small, and although only one Award is made annually, every entry will be written up in some detail in Mayfair's monthly column "Volunteer Groups in Action".

Send news of your project to Volunteer Groups, Mayfair Magazine, 481 University Avenue, Toronto 2. Deadline for entries January 31st, 1955.

ABOUT



PEOPLE

The Canadian Welfare Council has been deprived of a good friend by the recent death of **Mr. Karl C. Fraser** of Toronto at the early age of 54. Mr. Fraser served from 1946 to 1949 as a member of the Council's Finance Committee and for much of the period was its acting chairman. His active interest in the work of the Council continued until his death. Among Mr. Fraser's other social welfare interests were the John Howard Society and membership in the Committee for the Harry Cassidy Memorial Research Fund.

Dr. Jean F. Webb, acting chief of the child and mental health division of the Department of National Health and Welfare since 1952, has been appointed chief of the division. An outstanding Canadian paediatrician and authority on maternal health, Dr. Webb was formerly public health physician and director of nutrition services for New Brunswick's Department of Health and Social Services.

Ruth Brown joined the welfare section of the research division in the Department of National Health and Welfare in September. Her work is with family and child welfare. For the previous three years Miss Brown was with the adoption department of the Children's Aid and Infants' Homes of Toronto.

Réal Rouleau, formerly with *La société de réhabilitation des infirmes*,

Montreal, joined the staff of the *Société de service social aux familles*, Montreal, in September, as a consultant in his special field of social work with the handicapped.

Allan F. Parsons has become supervisor of the social service division, Department of Veterans Affairs, in Hamilton. He was with the Hamilton Children's Aid Society previously.

Ruth Doern was recently married to Howard W. Winkler and will be living in Morden, Manitoba. She is the former supervisor of the social service division, Department of Veterans Affairs, in Winnipeg.

Mrs. Helen Munz recently became assistant secretary of the family and child welfare division of the Welfare Council of Toronto. She replaces **Ophelia Teghtsoonian** who is now in England.

Muriel Frith has resigned as executive director of the Children's Aid Society of Winnipeg, having served there for 15 years. She plans to spend some time, after returning from a European holiday, studying at a school of social work in the United States. **Astra Eggerston** is now acting director of the CAS in Winnipeg.

Harold Treen assumed the post of director of family welfare and child protection in the Welfare Department of the city of Ottawa in October. Mr. Treen was previously

the associate director of the Peterborough Children's Aid Society.

Dr. David Kirk has been appointed assistant professor of social work, in charge of the group work sequence, at the McGill School of Social Work.

Dr. Verity Ross is now at the McGill School in the capacity of coordinator of field instruction, with administrative charge of the faculty committee on field work.

Isobel Black, director of nursing at the Montreal General Hospital was married to **Dr. Alastair MacLeod**, assistant executive director of the Mental Hygiene Institute in Montreal in September.

Mrs. Mary Coulter is the new executive assistant in charge of special projects at the Montreal Council of Social Agencies.

Avis Pumphrey, director of social services at the Montreal General Hospital, has taken a three months' leave of absence to make a survey and draw up recommendations for medical social service departments in hospitals in Saskatchewan.

Anne Black of Oak Lake, Manitoba, formerly senior supervisor of the Red Cross welfare team in the far east, is now Dean of Women and Director of the School of Social

Work at the Indore Christian College in India, the only Canadian on the staff of the College.

Lyna Mess, chief field consultant for the social welfare branch of B.C.'s Department of Health and Welfare, resigned August 31 to be married to Ross Broadfoot. She will be living in Guelph, Ontario.

Shirley Pierce, a graduate of the New York School of Social Work, has been appointed instructor of group work at the University of Manitoba School of Social Work.

Norma Panaro is the new executive secretary of the Central Volunteer Bureau of Winnipeg. She was formerly employed as a social worker in the provincial Department of Health and Public Welfare and in the Manitoba Cancer Relief and Research Institute.

Jack Zimmerman has recently assumed the position of assistant executive director of the Community Chest of Greater Winnipeg.

Andrew Crook of the Child Guidance Clinic in Halifax has just become the first executive director of the Nova Scotia Society for Mental Hygiene. This is a part-time position and Mr. Crook will continue his duties with the Child Guidance Clinic.

UNICEF GREETING CARDS

Five gay and colourful designs by Roger Duvoisin, a Swiss-born American illustrator. All profits will be devoted to the work of the United Nations Children's Fund.

Ten cards to a box, two of each design, with greetings in the five official languages of the United Nations (for Christmas use), or without greetings (for use as correspondence cards). \$1.00 a box.

Please address orders to:

United Nations Association of Canada,
340 McLeod Street, Ottawa.

WHAT THE COUNCIL IS DOING . . .

Autumn is the time when leaves start to fall, birds fly south, and welfare leaders gather to launch their program and financial campaign ships for the coming year. From our eyrie in Council House we have observed all these phenomena but shall spare you the flora and fauna and confine ourselves to the human interest.

Board of Governors

The Board met in Montreal on September 21 and had the truly exciting experience of giving general approval to plans for the new building. Yes, the great project is at last on the drawing board and the site is a fact! The lot is about 200 feet square, excellently situated facing Federal District Commission parkland on the Ottawa River. It is near the new government building development in the west end of Ottawa which includes the Dominion Bureau of Statistics and future quarters for the Department of National Health and Welfare.

During the summer a Board Committee, chaired by Mr. Arthur A. Crawley of Ottawa, has been working hard with the architect on the building plans, the staff putting in their bit on such mundane matters as the allocation of work space, the position of a supply hoist, and where rubbers and umbrellas can be conveniently cached. At its meeting, the Board had the pleasure of appointing Mr. W. Preston Gilbride, the energetic chairman of the CCC Division, as chairman of the Building Campaign Committee.

The goal was set at \$250,000 to cover land, building and equipment; the opening of the campaign will be in February 1955, and the date of occupancy is given as next July.

There are busy months ahead for Mr. Gilbride and the Committee he is forming. To raise this substantial amount of money will not be an easy task for the Council, which does not have the base for a popular campaign. We are sure, however, that all members and friends of the Council will rally generously to its support. Payments may be spread over three years which will be an advantage to many donors.

The urgency of the building project was underlined by another action of the Board: the approval of renting a new annex to meet the current increase in Council staff. The Lisgar Street offices, now too small, have been given up and the Family and Child Welfare Division staff have moved to premises on nearby Somerset Street where they have been joined by the staff of the Public Welfare and Delinquency and Crime Divisions. So a total of seven persons are now out-stationed from Council House and the ensuing administrative problems can be imagined.

Another highlight of the Board meeting was the decision to establish a standing Council committee on the needs of the aging. The move resulted from the report of the Committee, co-chaired by Senators Muriel Fergusson and C. Vaillancourt, that has been studying the role of the Council in this field. Senator Fergusson, who presented the report to the Board, has accepted the chairmanship of the standing committee whose aim is to assist in coordinating activities for the aging, act as a clearing house, and provide consultation services to aid local communities in their planning. Cliff Patrick, secretary of the Public Welfare Division is to staff the committee.

Community Chests and Councils Division

The National Executive Committee of the CCC Division met in Toronto on September 10, and as usual came up with a crowded calendar of projected activities. Each year we wonder how the Division can possibly get through its agenda and each year it shows an amazing degree of achievement. So it will again this year we are sure, even although the coveted third staff member ("the invisible man" or "low man on the totem pole"?) is still being sought.

A few samples of the Division's winter activities are: a conference co-sponsored with the Ontario Welfare Council, for small and middle sized city chests and councils to be held at Guelph, Ontario, on November 24. The theme is "Community Teamwork—Fact or Friction?" E. I. Birnbaum, President of the Guelph Council of Social Agencies is chairman of the Planning Committee.

A morning session will be held on "What are the Impediments to Joint Planning and Cooperation?" E. A. Dunlop, executive director of the Canadian Arthritis and Rheumatism Society, will lead the discussion and Bessie Touzel, executive director of the Ontario Welfare Council, will summarize it. At the luncheon a speaker (name to be announced) will talk about "The Goals of Social Planning". Afternoon sessions will concentrate on specific planning problems.

A special committee is being established to meet the request of two national organizations for a review of their budgets and support plans. It will also study the complicated question of allocation of national corporation donations to chests and national agencies where branches

of the agencies are local chest members. Chairman: Robert A. Willson, President of the Ontario Welfare Council; vice-chairman: W. H. Dewar, executive director of the Toronto Community Chest.

The Councils Section project on the use of the national health grants as it affects welfare activities has reached the stage where a survey and analysis of information collected, together with a number of policy questions it evokes, have been submitted to local councils for study and comment.

The registration of local council projects, which has proved a valuable resource for Division members, is to be brought up to date.

Plans for the CCC Mid-winter Meeting at the Royal York Hotel, Toronto, are already well forward, with business meetings to be held on January 26 and 27, and a conference on "Social Planning in an Expanding Federation" on January 28 and 29 (more on this in our next issue).

In addition, the Division will go on with its many current activities, including central services for chest campaigns, work with organized labour and corporations, and its negotiations with the Canadian Conference of National Voluntary Health and Welfare Organizations on registration and review of programs and budgets of national organizations. And already the staff has taken to the field, Tom Best having completed a month's trip covering all member chests from Sault Ste. Marie, Ontario, to Victoria, British Columbia.

Family and Child Welfare Division

The Executive Committee of this Division met on September 22 in Ottawa and was particularly happy

to have as guests members of the National Committee from Saskatchewan and Nova Scotia. This was the first meeting with the new staff members: Peter Stanne, who replaces Miss Burns as secretary of the Division, and Ghislaine Guindon, the long-awaited third staff member (thank heaven for a "visible woman"!)

These appointments are described elsewhere in this issue.

In view of the staff shake-up, the Executive Committee recognized that major attention in the next few months must go to staff and members getting acquainted. To this end, field work will be emphasized, Miss Guindon making an early trip through Quebec, and Mr. Stanne and Miss Murphy dividing parts of the east and west between them soon after the New Year.

As regards other program, the Committee found itself faced with a problem in deciding on priorities among the many suggestions submitted, and a poll of members' views is being taken. In the meantime, work on a number of long-term projects is continuing—for example, in the committees on Functions of a Family Agency and on Standards of Service to Unmarried Parents.

It was with great regret that the Division learned of the resignation for personal reasons of Mrs. J. M. Rudel of Montreal, one of its co-chairmen. Fortunately the Division will continue to have the excellent leadership of Mme Jeanne Langlois, its other chairman.

Mrs. Rudel has been a tower of strength to the Council since her election as chairman of the Child Welfare Division in 1950. Two major developments in that Division under her leadership were the establishment of a fee scale on a graduated

basis and the study and discussions which led to the merger with the Family Division in 1953. Mrs. Rudel also took a very active part in the Committee on Function and Organization throughout its two-and-a-half-years' work. Both there and in Board meetings she made a very special contribution through her effective representation of the point of view of a division giving direct service to the membership and her wise understanding of its relationship to the Council as a whole. Her part in the developing of close French-English relations within the Division was also outstanding. Both before and during her service with the Council she has worked extensively with the Children's Service Centre, the Welfare Federation, and the Council of Social Agencies in Montreal.

Public Welfare Division

The first call on the Public Welfare Division's attention this winter will of course be carrying out the recommendations in its study of its purpose and functions as approved at the annual meeting. So its National Executive Committee meeting in Ottawa on September 22 was naturally mainly concerned with organizational matters.

The meeting was a particularly good one for taking important long-term decisions as members from seven provinces were present. It was significant, therefore, that the decision was made to establish a French-speaking Membership Committee, centred in Montreal and conducting its meetings in French with English translations of minutes and other material for corresponding members. This project should make an impressive contribution to French-English cooperation in the Council, particularly as the Committee will be con-

sidering such fundamental questions as the basis for membership in the Division and the implications of recommendations on membership in the Council's Report on Function and Organization.

Establishment and terms of reference of a Program Committee were also agreed upon. It has been given authority to initiate projects as soon as possible. The Committee will be located in Toronto.

Lastly the meeting discussed various methods of working more closely with the other divisions of the Council in which public welfare often has so large a stake. Further exploration of these methods is now going actively forward.

French Commission

The Commission got off to a good start at its meeting in Montreal on September 21. On its agenda for the year are consideration of the Delinquency and Crime Division's forthcoming brief on gambling. (This Division's Executive Committee had

not yet met at the time of going to press, so a report on its activities is deferred).

The Commission will also study the implications for its work of the new Council committee on the aging, and will undertake responsibilities in the Council's building campaign. It is discussing with the Chests and Councils, Family and Child Welfare, and Public Welfare divisions the possibility of a French-speaking combined institute in Quebec City, perhaps on the topic "The expansion of regional social services".

The Commission appointed as its executive committee: Mr. Lucien Massé, Hull, chairman; Mme Edouard Dupuis and Monsignor C. E. Bourgeois of Montreal, vice-chairmen; Mr. A. Arvisais, Ottawa, and Mr. J. M. Guérard, Quebec. Miss Marie Hamel of the Council's staff acts as secretary. Mr. Guérard is the Commission's representative on the Council's Nominating Committee, and Mr. Arvisais on the Finance Committee.

Canadian Social Work Education Workshops

We have referred before to the Social Work Education project but think it timely to describe in more detail an activity in which the Council is not only directly involved but which is of interest and importance to all social welfare.

A Joint Committee was convened over a year ago under the auspices of the National Committee of Canadian Schools of Social Work to examine some of the problems of social work education in Canada. The Committee has representatives from the Canadian Association of Social Workers, Schools of Social Work, and the Canadian Welfare Council.

Father Swithun Bowers, director of St. Patrick's School of Social Welfare, Ottawa, is chairman of the committee. The CWC representatives are Lillian Thomson, General Secretary of the Neighborhood Workers Association in Toronto, and Phyllis Burns of the Council staff who also serves as secretary of the Joint Committee.

Using the branches of the Canadian Association of Social Workers as a nucleus, a series of local workshops on social work education were held in 13 centres in Canada. All report stimulating discussion of some of the basic difficulties in staffing the exist-

ing social services with well qualified people; and many interesting suggestions have been put forward about possible solutions of the problem.

Meantime, to advance the project further and come to some conclusions about the way in which provision of the necessary number of qualified social workers might be achieved in Canada, the Joint Committee sought the assistance of the Carnegie Foundation in New York, which had financed the Hollis-Taylor study of social work education in the United States. A grant of \$12,000 was made to the Canadian Committee of Schools to continue the project. Plans are now under way for several regional workshops in Canada to carry discussions to the next stage.

The Council has made the services of Elizabeth Govan, Secretary of Special Projects, available to give leadership in the development of these workshops, which will be held in various centres in Canada between November 15, 1954 and January 15,

1955. The first regional workshop takes place in Halifax on November 16 and 17.

If the regional workshops and the National Workshop, which is expected to follow them, succeed in helping Canadians to grapple with the severe shortage of personnel, particularly for certain key positions, the investment of time, energy and money which has been put into the project will have been well worthwhile.

Equally important, perhaps, it will have provided a meeting place in which lay and professional people will have pooled their interest and experience. Already, in the local workshops, board members and other volunteers from every conceivable occupation and profession have worked together with excellent results. They have demonstrated a basic truth: that social work education and personnel problems are the concern of all who are interested in better social welfare services.

BOOK



REVIEWS

Human Problems in Technological Change, a Casebook, edited by Edward H. Spicer. Russell Sage Foundation, New York, 1952. 300 pp. Price \$4.00.

This is a book valuable not only to those actually engaged in the field of aid to underdeveloped areas and backward peoples, but also to that body of public opinion which indicates a growing interest in the subject. The book had its origin in Cornell's program for research and training in culture and applied science, a development in the University's Depart-

ment of Sociology and Anthropology which was supported by the Carnegie Corporation.

Fourteen anthropologists, agriculturists and sociologists, nine of them from Cornell, have contributed to an interesting set of case histories which vary in locale from Alaska to South East Asia and in people from Eskimo herdsmen to Indian villagers.

The editor, Edward H. Spicer, Professor of Anthropology and Sociology at the University of Arizona, has done a splendid job of marshalling the material of his contributors into

statements of (1) The Problem, (2) The Course of Events, (3) Relevant Factors, (4) The Outcome and (5) Analysis. By following this procedure for each case history, comparison is simplified and patterns evolve which show up vividly the pitfalls inherent in attempting to change the ways of human beings.

As Alexander H. Leighton of Cornell points out in his foreword to the book, millions of people all over the world desire more freedom from starvation, disease and insecurity. They are aware of the technological power and efficiency of the West, but have little perception of the complex human difficulties involved. They want change, but have very incomplete ideas of the cost to their way of life: and he goes on to point out an even more cogent truth, that the members of Western society who introduce the changes are also incompletely aware of consequences. It seems justifiable to assume, therefore, that the technological experts in public health, land improvement, industrialization, and similar fields, together with the administrators of such programs, have some responsibility for the human relations involved in their work.

There are wise words, not always sufficiently pondered by many now engaged in seeking to bring about vast changes in the way of life of the people of underdeveloped areas. Here surely is a field for the community-trained psychiatrist who should perhaps be the first to work with the people in a new area selected for development. Thus minds could be prepared in advance of the arrival of the technicians, who could then devote their talents to their specialized fields of endeavour and sow their

education seed on ground which had been scientifically prepared for it.

NIK CAVELL.

*Administrator of Canada's
Participation in Colombo Plan,
Ottawa.*

Report of the Mission on Community Organization and Development in South and South-east Asia. United Nations, New York, 1954. (Toronto: Ryerson Press). 167 pp. Price \$2.50.

This Mission in the short period of eleven weeks covered vast territories in four great countries. It is but natural that more than half the time was spent in India and that the Report throughout deals more with problems of India than with Ceylon, Thailand and the Philippines. In the Introduction the Report mentions that the Technical Assistance Co-operative Administration of the United States, and the Ford Foundation are collaborating with the Government of India. This, along with the Colombo Plan (which is barely mentioned in the Report), certainly offers India trained assistance at this time.

In this Introduction it is however noted that a number of voluntary programs of a community nature have been in existence in India for as long as thirty years and have demonstrated the success which might well be achieved by further expansion of "community projects", which latter are now only in the formative stages. Community programs based to no small extent on many years of preliminary work by a previous government, offer a most important demonstration of the influence of social improvements in Asia.

Quite rightly the Report emphasizes the great need for the development of self-help, but that

national services on health and education must assume major responsibility.

Community projects often depend upon production projects such as irrigation and drainage. It is the writer's opinion that all community projects are dependent essentially upon the desire of the people for more income to satisfy food needs and living standards. Hence community projects in social improvement ultimately are dependent in these countries on agricultural improvement.

It is startling to realize from this Report that India's food production has not increased in recent years, yet her population increases more than 4,000,000 people per annum. Nor has India the same potential lands for increased development as have Ceylon, Thailand, and the Philippines. For this reason greater land use and greater water use through irrigation and drainage offer the most immediate opportunity for increased production.

Ceylon is relatively more advanced in social organization, and has set an example for other countries in the intensive development of women's movements, which are having a profound effect on home development, sanitation and living standards.

The question of land tenure as in all Eastern countries, looms most important. Fragmented holdings are wasteful of labour and reduce the production. Insecurity of tenure on the same area of land reduces the opportunity for home improvement and community efforts. Thailand is in a different position: land ownership is more prevalent, food surpluses and exports exist, the Government is able to provide free irriga-

tion water, and the cooperative movement is well advanced.

One is disappointed that the Philippines, in spite of U.S. influence over a period of years, is in the class of food deficit countries, with no national community projects, although the Agricultural School is having an excellent influence.

In economic and social advances one is impressed with their progress and also the effect of tradition in retarding incentive. The problem of using capital in order to make greater use of idle manpower reminds one that in many of these countries there often is a tendency to mechanize production to such an extent that idle men are still more idle. These countries need sound guidance before heavy investments are made in vast quantities of expensive equipment. Just so long as equipment purchases are of a nature which farmers or groups of farmers can afford, just so long as fertilizers are purchased of a nature best suited to the needs of the soils and crops, and just so long as improved seeds are introduced of the types and varieties which are known to be adaptable, then government and foreign capital is wisely expended. But even here community effort in nation wide or international problems must give place to intensive government activity. This is well illustrated by reference to malaria control being basic to agricultural production and land use.

Although there is considerable philosophizing in some sections of this Report, yet there are many examples of active projects which have stimulated community effort in the use of local labour towards improvement of roads, use of irrigation

water, and even the construction of schools.

Sections dealing with the village as the central unit are fairly exhaustive, but the writer is inclined to believe that the organization of co-operative movements for increased production and market is the first substantial and lasting step towards village improvement, with or without the aid of government to supply educational, medical and health services.

The population problem is also soundly treated. It is well recognized that increase of sanitary and health standards will still further tax food supplies, and that ultimately family planning and a modifying of the ancient cultural standards must become effective, even if food production increases.

The Mission states that it may take a long time to get sanitation standards developed in villages, but that some three to four years should see marked increase in food production. Unless the desire on the part of the people through material inducements or education is to increase production and to shake the individual from typical lethargy, then three to four years is much too short a time for material increases.

In India, as in other countries, lack of qualified teachers properly trained, whether at the vocational specialized level or the village workers' level, is probably the greatest present handicap. Yet India is making valiant efforts through her thirty training schools partly supported by the Ford Foundation and the extension courses of the six Agricultural Colleges. In this respect she has much better facilities for training than the other three countries.

One is impressed by the clear-cut

recommendations of the Mission, and particularly those emphasizing the following:

Co-operation amongst the various agencies giving technical assistance is imperative to stimulate progress and avoid waste.

Short term assignments of experts from other countries are a deterrent as compared with assignments long enough for the experts to become acquainted with the language and the people.

The appointment of paid officials in technical assistance who are natives is essential for permanent progress.

In India and the other three countries the problem of community organization and development is still largely in the planning stages, and it is hoped that emphasis will be placed on the top priorities, namely: the stimulation of desire on the part of the individuals and villages to take responsibility; and equally and by no means the least in priority, the education of women and the organization of women's units in the development of better sanitary conditions and home improvement and by the stimulation through them of the men for better educational facilities.

E. S. ARCHIBALD.

Ottawa.

Guide Lines for Group Leaders, by Janet P. and Clyde E. Murray. Whiteside Inc., and William Morrow & Co. Inc., New York, 1954. 217 pp. Price \$3.95.

The most stimulating thing about this book is the colorful wrapper, with a geometric design on it. When is a social worker going to write something with a positive punch; a message which will inspire people including the group leader?

Regardless of the fact that the authors of *Guide Lines for Group Leaders* have a varied background of studying, teaching and practising Group Work, little if anything is recorded here that has not been written or said before now. The material and the presentation is very similar to the work of Slavson and Trecker, particularly Slavson's *Creative Group Education*.

The professional group worker will find this book a pleasant easy-to-read review of much that he has already studied. The lay group leader will also find it easy to digest, but he may be led into the error of thinking that the practice of group work is easy.

Guide Lines for Group Leaders is a digest of much of the theory of group work, its philosophy and psychology, plus some program ideas. A number of case histories make entertaining reading, although they account for about 30 per cent of the total volume. An additional 6 to 7 per cent of the book is taken up with direct reference to the case histories in the form of post-mortem interpretations and evaluations.

Nothing new has been added. A good book for the library of any agency that has money to spare.

LLOYD J. M. SKEAFF

YMCA,
Belleville, Ontario.

The Province of Ontario—Its Welfare Services, by Bessie Touzel. Community Welfare Council of Ontario, Toronto, 1954. 118 pp. Price \$1.00.

"The Province of Ontario—Its Welfare Services" was prepared by Miss Touzel as a contribution to the knowledge of "what is" in welfare services and to re-acquaint herself with such detail in preparation for

her work with the Community Welfare Council of Ontario.

Nowhere else is there such welfare information about Ontario at present available. Miss Touzel interprets welfare in its broader aspects, including in addition to the work of the Department of Public Welfare itself (which is given most attention) welfare work in the provincial Departments of Health, the Attorney General, and Reform Institutions, and in voluntary agencies.

The introductory chapter provides historical background for the study of present day services, a wise choice in adding perspective to the work.

The skeletal structure of the document is: tax supported services including federal, provincial and municipal jurisdictions; voluntarily supported services; and research services. The table of contents is detailed enough to be used as index.

Some of the welfare principles enunciated and endorsed by Miss Touzel are expressed thus: "Responsibility for meeting problems of living to-day . . . is a mutual responsibility of individuals and society." "Appropriate research is essential to good social planning." "Plans for developing services . . . must be related to the pattern of the social and economic organization of the community . . ."

Any writer of this type of document lives, during its writing, if not longer, in a constant state of bedevilment, torn between the need for obtaining accuracy of detail and the urge to get the latest facts included, for as every such writer knows, details became out-of-date soon enough. Such documents need to be written, however, if only to provide a base for revision.

There is considerable welcome detail about the Ontario provincial

welfare services particularly in regard to unemployment relief and its relation to municipalities, concerning which many have definite views but indefinite knowledge.

The detail of provincial private organization is also welcome and while not extensive is more comprehensive than can be found elsewhere in any one publication.

STANLEY CROW

Ontario Department of Public Welfare, Toronto.

The Race Question in Modern Science. Unesco Pamphlets, obtainable from Ryerson Press, Toronto:

Race and Biology, by L. C. Dunn. 1951. 48 pp. Price 25 cents.

Race and Psychology, by Otto Klineberg. 1951. 40 pp. Price 25 cents.

The Roots of Prejudice, by A. M. Rose. 1951. 41 pp. Price 25 cents.

Race and Culture, by M. Leiris. 1951. 46 pp. Price 25 cents.

There is an article in the Universal Declaration of Human Rights which reads as follows:

Everyone is entitled to all the rights and freedoms set forth in the Declaration without distinction of any kind, such as race, colour, language, religion, political or other opinion, national or social origin, property, birth or other status.

Unesco, in publishing this series of pamphlets, four of which are considered here, has taken positive action to combat, through education, the vitiating effects of prejudice and racism on the peoples of the world. The manner in which the "racism" has taken root in western societies, and the complete repudiation of any biological basis for the existence of a superior race, have been ably set forth by the authors.

Each in turn has stated his arguments from the point of view of biology, psychology, culture and a consideration of the roots of prejudice. In many instances the scope of one booklet overlaps that of another so that the reader will find fundamental ideas put forth in one text equally ably developed in another.

Race and Biology by L. C. Dunn, Professor of Zoology at Columbia University, sets forth the biological concept of race, presenting the thesis that races, in the light of modern science, appear to be biological subgroups of the single species, homo sapiens, in which the similar heredity which the whole group has in common far outweighs the relative and minor ways in which the sub-groups mate.

He shows that "biological heredity, transmitted over the living bridge of egg and sperm, is the sole biological connection between the generations" and that biological characters are transmitted by the genes. In the production of new life, the genes do not blend to produce in the offspring an even mixture having characters of both parents that could lead to a disappearance of variability and thus to a "pure race". The variability of the peoples of the world is evidence of the fact that genes do change spontaneously by mutation. "The origin of new genes by mutation is apparently the source of the hereditary variability by which individuals and groups of men are distinguished."

After showing that there are definite characteristics, such as blood type, that manifest themselves more often in one group than in another, Dr. Dunn states that this is merely a geographic phenomenon and that that "geographical isolation has undoubtedly been the great race-

maker." He concludes that "biologically, men share in a common pool of genes. Thus there is no biological justification for race-hatred or prejudice."

A different approach is used by Otto Klineberg, Professor of Psychology at Columbia University in *Race and Psychology*. The psychological tests developed early in the century proved to be of inestimable value in measuring the innate intelligence of individuals. They were used also to measure the capacities of different national groups, and the results obtained led psychologists to believe that there was an actual difference in the capacities of different groups. Since their findings confirmed the prevailing prejudices of western society, these results were eagerly made use of.

Psychologists soon discovered that instead of indicating differences in innate capacities, the tests merely indicated that the difference in capacity was due to differences in the environment of the peoples under comparison. Whenever the environmental conditions were equalized, the differences in test scores disappeared completely.

In his pamphlet *The Roots of Prejudice*, Arnold M. Rose, Professor of Sociology at the University of Minnesota, strikes to the root of the problem of prejudice and racism. The varied aspects of prejudice, with all its ramifications, are brought to light. The effects of personal advantage accruing to the prejudiced, the causes of prejudice, and the transmission of prejudice to children are among the topics discussed.

Of considerable importance to the understanding of the problem is the fact that "race prejudice" is distinct from "prejudice" is a relatively

modern phenomenon, existing for only about two hundred years. It coincides with the period of colonial expansion by the Europeans, which made it expedient to excuse violence and oppression by proclaiming the inferiority of the oppressed.

In his conclusion, Dr. Rose points the direction that would lead to the alleviation of this evil by listing suggestions for a concerted program which "within a generation or two" would at least greatly reduce prejudice.

Michel Leiris, a member of the National Research Center of Paris, in his treatment of the subject of *Race and Culture* has had of necessity to cover much of the ground dealt with by the authors of the aforementioned pamphlets. He indicates that from the genetic point of view it would be impossible to regard the world population of today as anything but a hodgepodge, and that the world is separated more in terms of different cultures than in terms of race. He shows that it is the culture of a society that affects the life of the individual at every level, and its influence is as apparent in the way in which a man satisfies his physical needs as in his ethics or his intellectual life.

A society's culture is constantly evolving, modifying and taking on new forms. Just as there is no such thing as a 'pure race' so too is there no pure culture.

Race and Culture does not read as easily as the other pamphlets. This is partly because of style. Mr. Leiris has incorporated many secondary ideas parenthetically within his sentence structure, thus producing sentences of inordinate complexity and length.

MAURICE A. RYANT.
Ottawa.

Time to Think of Christmas

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COMING EVENTS OF INTEREST TO COUNCIL MEMBERS

November 17 and 18. Maritime Regional Workshop on Social Work Education. King's College, Halifax.

November 24. Ontario Conference, Community Chests and Councils Division. YMCA building, McDonnell Street, Guelph. Subject, "Community Teamwork—Fact or Friction".

November 25. Canadian Welfare Council French Commission meeting. Montreal.

December 10 and 11. Quebec Regional Workshop on Social Work Education. Toronto.

January 27 to 29, 1955. National Conference on Adoption under the auspices of the Child Welfare League of America. Chicago.

May 5 to 7, 1955. Annual Meeting. Canadian Welfare Council. Prince Edward Hotel, Windsor, Ont.

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